

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well****FEE
\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You **must** include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA D -	BASIN PIN	SUBBASIN 11	D(4-9)28 DAC
RECEIVED DATE 9-22-2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 10-11-2017	REMEDIAL ACTION SITE 000	55- 482793	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://qisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well	
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS	
<input type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer		
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical		
<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Mineral Exploration		
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):		
ORIGINAL WELL OWNER (IF KNOWN) Conoco		TOWNSHIP (N/S) 4.0 S	
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		RANGE (E/W) 9.0 E	
		SECTION 28	
		160 ACRE SW 1/4	
		40 ACRE NE 1/4	
		10 ACRE SW 1/4	
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL	
		4001	
		COUNTY WHERE WELL IS LOCATED PINAL	
		LATITUDE 33 ° 2 ' 59.51 "N	
		LONGITUDE 111 ° 25 ' 58.52 "W	
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held	
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade	
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)	
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Lauren Candreva
TELEPHONE NUMBER (480) 558-3500	TELEPHONE NUMBER 602-760-2429
EMAIL ADDRESS jstephens@nationalewp.com	EMAIL ADDRESS lcandreva@haleyaldrich.com

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 28S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

VARIANCE GRANTED

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 -

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	650	5.74	NA												
650	2227	2.97													

Condition of casing: (good, fair, poor, unknown) UNKNOWN

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK					
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	GROUT	CHIPS	PELLETS	IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE			SAND	GRAVEL	SIZE
NA														

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	SAND			
0	5						5	2227									1:1	191.8
5	25					Blast perforate												

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method
 ☐ Alternative 4:
 ☐ Other (please specify):
☐ Alternative 1
 ☐ Variance Option *
☐ Alternative 2
☒ Alternative 5:
☐ Alternative 3
☐ Variance Option 1*
 * requires a letter requesting a variance
☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

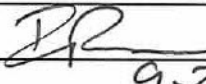
55 -

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER Authorized under Mineral Lease #11-026500	SIGNATURE OF WELL OWNER 
DATE	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 28S

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482793

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S) 4.0 S	RANGE (E/W) 9.0 E	SECTION 28	160 ACRE SW 1/4	40 ACRE NE 1/4	10 ACRE SW 1/4
CITY / STATE / ZIP CODE Florence, AZ 85132		LATITUDE 33 ° Degrees	2 ' Minutes	59.51 "N Seconds	LONGITUDE 111 ° Degrees	25 ' Minutes	58.52 "W Seconds
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
TELEPHONE NUMBER 520-374-3984	FAX 520-374-3999	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL			COUNTY WHERE WELL IS LOCATED PINAL		

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR TO** the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823	DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4	
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

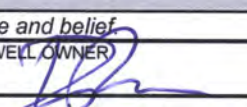
NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.	
TYPE OR PRINT NAME AND TITLE Ian Ream, Sr. Hydrogeologist	SIGNATURE OF WELL OWNER  DATE 1-2-2018



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 38020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 DAC

WELL REGISTRATION NUMBER

55 - 482793

Drilling Firm		
Mail To:	NAME	DWR LICENSE NUMBER
	LAYNE CHRISTENSEN COMPANY	7
	ADDRESS	TELEPHONE NUMBER
	12030 EAST RIGGS ROAD	480-895-9336
	CITY / STATE / ZIP	FAX
	CHANDLER, AZ 85249-3701	

Well Owner Information	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	CONTACT PERSON NAME AND TITLE
FLORENCE COPPER, INC	Ian Ream Senior Hydrogeologist
MAILING ADDRESS	TELEPHONE NUMBER
1575 W. HUNT HWY.	520-374-3984
CITY / STATE / ZIP	FAX
FLORENCE, AZ 85132	520-374-3999

Location of Well					
WELL LOCATION ADDRESS (IF ANY)					
LATITUDE					
33 ° 2 ' 59.51" N 111 ° 25 ' 58.52" W					
Degrees Minutes Seconds					
LAND SURFACE ELEVATION AT WELL					
1470 Feet Above Sea Level					
METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held					
<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)					
<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
4.0 S	9.0 E	28	SW 1/4	NE 1/4	SW 1/4

COUNTY ASSESSOR'S PARCEL ID NUMBER	BOOK	MAP	PARCEL

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate
5. Was the well casing video logged?		X	
6. Why was the well abandoned?			
No longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482793

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (Inches)	DEPTH FROM SURFACE		OUTER DIAMETER (Inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (Inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	650	5.74	0	650	3	X				X						
650	788	3	650	788	2	X				X						

Condition of casing: ☐ Good ☐ Fair ☒ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
N/A												

Actual Well Abandonment (See Well Abandonment Handbook)																			
Refer to ADWR's Well Abandonment Handbook for additional Information										DEPTH TO WATER N/A Feet Below Land Surface		DATE ABANDONMENT COMPLETED 1-23-2018							
Casing Treatment										Sealing or Fill Material			MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)					
DEPTH FROM SURFACE		TREATMENT TYPE (T)						DEPTH FROM SURFACE		MATERIAL TYPE (T)									
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND	
0	5				X			5	788							GROUT	CHIPS	PELLETS	
5	25					Blast Per													

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material			
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)			
Blast & Perforate							

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE Scott Graham, Superintendent	SIGNATURE OF QUALIFYING PARTY [Signature] 3/2/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482793** WELL OWNER ID: 28S

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SW 1/4 of the **NE** 1/4 of the **SE** 1/4 Section **28** Township **4.0** **SOUTH** Range **9.0** **EAST**

NO. OF WELLS IN THIS PROJECT: **1**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF **September 23, 2018**

Sally Munillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

Notice of Intention to Abandon a Well

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR		FILE NUMBER
AMA/INA <i>Final</i>	BASIN <i>PIN</i>	SUBBASIN <i>11</i>
RECEIVED DATE <i>7/12/2017</i>	WATERSHED <i>08 UGR</i>	WELL REGISTRATION NUMBER
ISSUED DATE <i>7/14/2017</i>	REMEDIAL ACTION SITE <i>000</i>	55- <i>482773</i>

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic		<input type="checkbox"/> Monitor / Piezometer					
<input type="checkbox"/> Stock		<input type="checkbox"/> Geotechnical					
<input type="checkbox"/> Irrigation		<input checked="" type="checkbox"/> Mineral Exploration					
<input type="checkbox"/> Municipal		<input type="checkbox"/> Other (please specify):					
ORIGINAL WELL OWNER (IF KNOWN)		TOWNSHIP (N/S)					
Conoco		4.0 S					
ORIGINAL WELL DRILLING FIRM (IF KNOWN)		RANGE (E/W)					
Unknown		9.0 E					
DRILL DATE (IF KNOWN)		SECTION					
Unknown		28					
		160 ACRE					
		SE 1/4					
		40 ACRE					
		NE 1/4					
		10 ACRE					
		NE 1/4					
		COUNTY ASSESSOR'S PARCEL ID NUMBER					
		BOOK MAP PARCEL					
		1001					
		COUNTY WHERE WELL IS LOCATED					
		PINAL					
		LATITUDE					
		33 °					
		3 ' 9.57 "N					
		111 °					
		25 ' 20.77 "W					
		Degrees Minutes Seconds Degrees Minutes Seconds					
		METHOD OF LATITUDE/LONGITUDE (check one)					
		<input type="checkbox"/> *GPS: Hand-Held					
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Land Owner		Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL	
Arizona State Land Department (Mineral Lease #11-026500)		Florence Copper Inc.	
MAILING ADDRESS		MAILING ADDRESS	
1616 W. Adams Street		1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
Phoenix, AZ 85007		Florence, Arizona 85123	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
Lisa Atkins (State Land Commissioner)		Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER		TELEPHONE NUMBER	
(602) 542-4631		(520) 374-3984	
FAX NUMBER		FAX NUMBER	
		(520) 374-3999	

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME		CONSULTING FIRM	
National EWP, INC		Haley & Aldrich, Inc.	
DWR LICENSE NUMBER		CONTACT PERSON NAME	
823		Mark Nicholls	
TELEPHONE NUMBER		TELEPHONE NUMBER	
(480) 558-3500		(602) 760-2423	
ROC LICENSE CATEGORY		EMAIL ADDRESS	
A-4		MNicholls@haleyaldrich.com	
EMAIL ADDRESS			
jstephens@nationalewp.com			

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 53S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 402773

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	340	5	NA													
340	1421	2.97														

Condition of casing: (good, fair, poor, unknown) UNKNOWN

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
NA												

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE										MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT	CHIPS	PELLETS			SAND	
NA							5	1421	<input checked="" type="checkbox"/>											1:1	97.69
							0	5													

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):

☐ Alternative 1 ☐ Variance Option *

☐ Alternative 2 ☒ Alternative 5:

☐ Alternative 3 ☐ Variance Option 1* ☐ Variance Option 2*

* requires a letter requesting a variance

Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

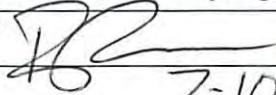
55 - 482773

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

*See Attached***SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE**

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 7-10-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 53S

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482773

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
		4.0 S	9.0 E	28	SE ¼	NE ¼	NE ¼
CITY / STATE / ZIP CODE Florence, AZ 85132		LATITUDE 33 °	3 '	9.57 "N	LONGITUDE 111 °	25 '	20.77 "W
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
TELEPHONE NUMBER 520-374-3984	FAX 520-374-3999	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL				COUNTY WHERE WELL IS LOCATED PINAL	

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR** TO the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

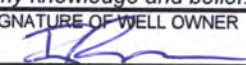
EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE Ian Ream, Sr. Hydrogeologist	SIGNATURE OF WELL OWNER 	DATE 1-2-2018
--	---	------------------



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report withing 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 DAA

WELL REGISTRATION NUMBER

55 - 482773

SECTION 1: ABANDONMENT AUTHORIZATION

Drilling Firm		
Mail To:	NAME LAYNE CHRISTENSEN COMPANY	DWR LICENSE NUMBER 7
	ADDRESS 12030 EAST RIGGS ROAD	TELEPHONE NUMBER 480-895-9336
	CITY / STATE / ZIP CHANDLER, AZ 85249-3701	FAX

Well Owner Information						
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC.	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Geologist					
MAILING ADDRESS 1575 W. HUNT HIGHWAY	TELEPHONE NUMBER 520-374-3984					
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999					
Location of Well						
WELL LOCATION ADDRESS (IF ANY)	LATITUDE 33° 3' 9.57" N Degrees Minutes Seconds	LONGITUDE 111° 25' 20.77" W Degrees Minutes Seconds				
TOWNSHIP (N/S) 4.0 S	RANGE (E/W) 9.0E	SECTION 28	160 ACRE SE 1/4	40 ACRE NE 1/4	10 ACRE NE 1/4	LAND SURFACE ELEVATION AT WELL Feet Above Sea Level
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade
						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):

SECTION 2			
Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 53S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate 5'-25'
5. Was the well casing video logged?		X	
6. Why was the well abandoned? Well is no longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482773

SECTION 3. Casing and Well Construction Design (attach additional page if needed)															
Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (Inches)	DEPTH FROM SURFACE		OUTER DIAMETER (Inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (Inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	340	5	NA												
340	1421	2.97													

Condition of casing: ☐ Good ☐ Fair ☐ Poor unknown

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
NA												

Refer to ADWR's Well Abandonment Handbook for additional information		DEPTH TO WATER Feet Below Land Surface	DATE ABANDONMENT COMPLETED
			2-17-2018

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)							MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS				SAND
NA							0	5									Native	
							5	1421									1:1	97.69

Actual Abandonment Method (See Well Abandonment Handbook)						Emplacement Method of Sealing or Fill Material					
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2 Blast & Perforate Type V Cement						CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)					

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-16-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <i>Scott Graham</i>	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i> DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482773** WELL OWNER ID: 53S

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the NE 1/4 of the SE 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**


THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Munillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.



 Arizona Department of Water Resources Groundwater Permitting and Wells Section P.O. Box 36020 Phoenix, Arizona 85067-6020 (602) 771-8527 • (602) 771-8690 fax • www.azwater.gov •	MAR 15 2017 ADWR	Notice of Intention to Abandon a Well	FEE \$150.00
	TO BE COMPLETED BY ADWR		FILE NUMBER D(49)28 CAC
❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink. ❖ You <u>must</u> include with your Notice: ➤ Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6. ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104	AMATA D-	BASIN PIN	SUBBASIN 11
	RECEIVED DATE 3-15-2017	WATERSHED 08	WELL REGISTRATION NUMBER 55- 482744
	ISSUED DATE 3-16-2017	REMEDIAL ACTION SITE 000	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well											
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS											
<input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal		<input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify):											
ORIGINAL WELL OWNER (IF KNOWN) Conoco		TOWNSHIP (N/S) 4.0 S		RANGE (E/W) 9.0 E		SECTION 28		160 ACRE SW 1/4		40 ACRE NE 1/4		10 ACRE SW 1/4	
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Unknown		DRILL DATE (IF KNOWN) April 1972		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001		COUNTY WHERE WELL IS LOCATED PINAL							
				LATITUDE 33 ° 2 ' 59.38 "N Degrees Minutes Seconds		LONGITUDE 111 ° 26 ' 4.22 "W Degrees Minutes Seconds							
				METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade				<input type="checkbox"/> *GPS: Hand-Held					
				*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):									

SECTION 2. OWNER INFORMATION

Land Owner		Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.	
MAILING ADDRESS 1616 W. Adams Street		MAILING ADDRESS 1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE Phoenix, AZ 85007		CITY / STATE / ZIP CODE Florence, Arizona 85123	
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)		CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER (602) 542-4631		TELEPHONE NUMBER (520) 374-3984	
FAX NUMBER		FAX NUMBER (520) 374-3999	

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME National EWP, INC		CONSULTING FIRM Haley & Aldrich, Inc.	
DWR LICENSE NUMBER 823	ROC LICENSE CATEGORY A-4	CONTACT PERSON NAME Mark Nicholls	
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS jstephens@nationalewp.com	TELEPHONE NUMBER (602) 760-2423	EMAIL ADDRESS MNicholls@haleyaldrich.com

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 94S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482744

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	560	5.5	0	560	4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
560	2038	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE								FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	GROUT	CHIPS	PELLETS	IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
0	560	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

VARIANCE GRANTED

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE					DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE					
														GROUT	CHIPS	PELLETS			SAND
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	2038	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	98.35
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

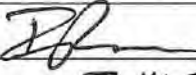
55 - 402744

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 3-14-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482744 WELL OWNER ID: 94S

AUTHORIZED DRILLER: NATIONAL EWP, INC.

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SW 1/4 of the NE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Munillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





Arizona Department of Water Resources
Information Management Unit
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 602-771-8500

Project Completion Report for Mineral Exploration Drilling

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ This report should be prepared by the well owner or exploration firm in detail and filed with the Department within 30 days following completion of the project as a whole.

FILE NUMBER
D(4-9) 28 CAC
WELL REGISTRATION NUMBER
55 - 482744

**** PLEASE PRINT CLEARLY ****

SECTION 1. LOCATION OF WELL

WELL LOCATION ADDRESS (IF ANY)

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
4S	9E	28	SW 1/4	NE 1/4	SW 1/4

SECTION 2. OWNER INFORMATION

Well Owner

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL
FLORENCE COPPER, INC.

MAILING ADDRESS

1575 W. HUNT HIGHWAY

CITY / STATE / ZIP

FLORENCE, AZ, 85132

CONTACT PERSON NAME AND TITLE

Ian Ream - Sr. Hydrologist

TELEPHONE NUMBER

520 374-3984

FAX

SECTION 3. DRILLER AUTHORIZATION

Drilling Firm

NAME

NATIONAL EWP, INC.

DWR LICENSE NUMBER

823

TELEPHONE NUMBER

480-558-3500

FAX

SECTION 4.

DATE DRILLING PROJECT STARTED

4.7.17

DATE DRILLING PROJECT COMPLETED

4.9.17

NUMBER OF HOLES

1

MAXIMUM DEPTH OF BORING

2038

ft. below land surface

Casing (if installed)

OUTER DIAMETER (Inches)	MATERIAL (T)			DESCRIBE IF OTHER TYPE,
	STEEL	PVC	ABS	
5.5	X			

Geologic Log of Well

CHECK ONE

☐ Unconsolidation Formation

☒ Consolidated Formation

STATIC WATER LEVEL (IF ENCOUNTERED OR DETECTED)

N/A

FEET BELOW LAND SURFACE

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (if abandoned)

Casing Treatment (if applicable)

SEALING OR FILL MATERIAL

DEPTH FROM SURFACE		MATERIAL (T)					DEPTH FROM SURFACE		MATERIAL (T)										MIXING RATIO BY (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE			SAND			
														GROUT	CHIPS	PELLETS				
0	5				x		5	525	x										1:1	31.5
5	25			x			525	531								x				
25	430				x															

I state that this report is filed in compliance with A.A.C. R12-15-817(C) and is complete and correct to the best of my knowledge and belief.

SIGNATURE OF QUALIFYING PARTY

[Signature]

DATE

8-3-17

Arizona Department of Water Resources Groundwater Permitting and Wells Section P.O. Box 36020 Phoenix, Arizona 85067-6020 (602) 771-8527 • (602) 771-8690 fax • www.azwater.gov •	Notice of Intention to Abandon a Well <div style="float: right; border: 1px solid black; padding: 2px; text-align: left;"> FEE \$150.00 </div>																
<ul style="list-style-type: none"> ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink. ❖ You <u>must</u> include with your Notice: <ul style="list-style-type: none"> ➢ Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6. ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">TO BE COMPLETED BY ADWR</th> <th style="text-align: left; padding: 2px;">FILE NUMBER</th> </tr> <tr> <td style="width: 33%; padding: 2px;"> AMA/INA <i>Pinall</i> </td> <td style="width: 33%; padding: 2px;"> BASIN <i>Pin</i> </td> <td style="width: 33%; padding: 2px;"> SUBBASIN <i>11</i> </td> <td style="padding: 2px;"> <i>D(49)28</i> </td> </tr> <tr> <td style="padding: 2px;"> RECEIVED DATE <i>4/7/2017</i> </td> <td colspan="2" style="padding: 2px;"> WATERSHED <i>08</i> </td> <td style="padding: 2px;"> WELL REGISTRATION NUMBER <i>55-482747</i> </td> </tr> <tr> <td style="padding: 2px;"> ISSUED DATE <i>4/13/2017</i> </td> <td colspan="3" style="padding: 2px;"> REMEDIAL ACTION SITE </td> </tr> </table>	TO BE COMPLETED BY ADWR			FILE NUMBER	AMA/INA <i>Pinall</i>	BASIN <i>Pin</i>	SUBBASIN <i>11</i>	<i>D(49)28</i>	RECEIVED DATE <i>4/7/2017</i>	WATERSHED <i>08</i>		WELL REGISTRATION NUMBER <i>55-482747</i>	ISSUED DATE <i>4/13/2017</i>	REMEDIAL ACTION SITE		
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ISSUED DATE <i>4/13/2017</i>	REMEDIAL ACTION SITE																

SECTION 1. REGISTRY INFORMATION																			
To determine the location of well, please refer to the Well Registry Map (https://gisweb.azwater.gov/WellRegistry/Default.aspx) and Google Earth (http://www.earthpoint.us/Townships.aspx)																			
Well Type	Location of Well																		
CHECK ONE <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal </div> <div> <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify): </div> </div>	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 16.6%;">TOWNSHIP (N/S)</th> <th style="width: 16.6%;">RANGE (E/W)</th> <th style="width: 16.6%;">SECTION</th> <th style="width: 16.6%;">160 ACRE</th> <th style="width: 16.6%;">40 ACRE</th> <th style="width: 16.6%;">10 ACRE</th> </tr> <tr> <td style="text-align: center;">4.0 S</td> <td style="text-align: center;">9.0 E</td> <td style="text-align: center;">28</td> <td style="text-align: center;">SW ¼</td> <td style="text-align: center;">NW ¼</td> <td style="text-align: center;">SE ¼</td> </tr> </table>	TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	4.0 S	9.0 E	28	SW ¼	NW ¼	SE ¼						
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4.0 S	9.0 E	28	SW ¼	NW ¼	SE ¼														
ORIGINAL WELL OWNER (IF KNOWN) Conoco	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">COUNTY ASSESSOR'S PARCEL ID NUMBER</th> <th style="width: 33%;">COUNTY WHERE WELL IS LOCATED</th> </tr> <tr> <td style="text-align: center;">BOOK MAP PARCEL 1001</td> <td style="text-align: center;">PINAL</td> </tr> </table>	COUNTY ASSESSOR'S PARCEL ID NUMBER	COUNTY WHERE WELL IS LOCATED	BOOK MAP PARCEL 1001	PINAL														
COUNTY ASSESSOR'S PARCEL ID NUMBER	COUNTY WHERE WELL IS LOCATED																		
BOOK MAP PARCEL 1001	PINAL																		
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Unknown	DRILL DATE (IF KNOWN) Unknown																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">LATITUDE</th> <th colspan="3" style="text-align: left;">LONGITUDE</th> </tr> <tr> <td style="width: 16.6%;">33 °</td> <td style="width: 16.6%;">2 ' 59.41 "N</td> <td style="width: 16.6%;"></td> <td style="width: 16.6%;">111 °</td> <td style="width: 16.6%;">26 ' 10.09 "W</td> <td style="width: 16.6%;"></td> </tr> <tr> <td style="text-align: center;">Degrees</td> <td style="text-align: center;">Minutes</td> <td style="text-align: center;">Seconds</td> <td style="text-align: center;">Degrees</td> <td style="text-align: center;">Minutes</td> <td style="text-align: center;">Seconds</td> </tr> </table>		LATITUDE			LONGITUDE			33 °	2 ' 59.41 "N		111 °	26 ' 10.09 "W		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
LATITUDE			LONGITUDE																
33 °	2 ' 59.41 "N		111 °	26 ' 10.09 "W															
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds														
METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):																			

SECTION 2. OWNER INFORMATION	
Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER (602) 542-4631	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION	
Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
ROC LICENSE CATEGORY A-4	TELEPHONE NUMBER (602) 760-2423
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS MNicholls@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.			
Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 95S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482747

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	590	5	NA													
590	1842	2.97														

Condition of casing: (good, fair, poor, unknown) UNKNOWN

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
NA												

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
NA							5	1842	<input checked="" type="checkbox"/>											1:1	140.03

Proposed Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4:
☐ Variance Option *
☒ Alternative 5:
☐ Variance Option 1*
☐ Variance Option 2*

* requires a letter requesting a variance

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER


55 - 487-747

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 7-6-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482747 WELL OWNER ID: 95s

AUTHORIZED DRILLER: NATIONAL EWP, INC.

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SE 1/4 of the NW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Murillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CBD

WELL REGISTRATION NUMBER

55 - 482747

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME NATIONAL EWP, INC.	DWR LICENSE NUMBER 823
	ADDRESS 1200 W. SAN PEDRO ST.	TELEPHONE NUMBER 480-558-3500
	CITY / STATE / ZIP GILBERT, AZ 85233	FAX

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER INC	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrologist
MAILING ADDRESS 1575 W HUNT HWY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE 33° 2' 59.41" N Degrees Minutes Seconds			LONGITUDE 111° 26' 10.09" W Degrees Minutes Seconds		
TOWNSHIP (N/S) 4S	RANGE (E/W) 9E	SECTION 28	160 ACRE SW 1/4	40 ACRE NW 1/4	10 ACRE SE 1/4	LAND SURFACE ELEVATION AT WELL 1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 95S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	X		* Blast Perf 5-25 ft
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482747

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)																			
Existing Borehole			Existing Casing (to the best of your knowledge)																
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)				
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE			
0	590	5.5	0	742.5	4		U	n	k	n	o	w	n	X					
590	1842	2.97																	

Condition of casing: ☐ Good ☐ Fair ☒ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	742.5	X										

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)		
Refer to ADWR's Well Abandonment Handbook for additional Information	DEPTH TO WATER n/a Feet Below Land Surface	DATE ABANDONMENT COMPLETED 7.11.17

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)							MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS					
0	5				X		5	742.5	X									15.2	47.4
5	740					Blast & Perforate													

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	
<input checked="" type="checkbox"/> Other (please specify) Grout and Blast Type V Cement					

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE William Eddy	SIGNATURE OF QUALIFYING PARTY DATE 11-6-17

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

ADWR

FEE	
\$150.00	

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA D-	BASIN PIN	SUBBASIN 11	D(4-9)28 CBD
RECEIVED DATE 3-15-2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 3-16-2017	REMEDIAL ACTION SITE 000	55- 482745	

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well	
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS	
<input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal		<input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify):	
ORIGINAL WELL OWNER (IF KNOWN)		TOWNSHIP (N/S)	
Conoco		4.0 S	
ORIGINAL WELL DRILLING FIRM (IF KNOWN)		RANGE (E/W)	
Joy		9.0 E	
DRILL DATE (IF KNOWN)		SECTION	
October 1971		28	
		160 ACRE	
		SW 1/4	
		NW 1/4	
		SE 1/4	
		COUNTY ASSESSOR'S PARCEL ID NUMBER	
		BOOK	
		MAP	
		PARCEL	
		1001	
		COUNTY WHERE WELL IS LOCATED	
		PINAL	
		LATITUDE	
		33 °	
		2 '	
		53.15 "N	
		111 °	
		26 '	
		7.15 "W	
		Degrees	
		Minutes	
		Seconds	
		METHOD OF LATITUDE/LONGITUDE (check one)	
		<input type="checkbox"/> *GPS: Hand-Held	
		<input type="checkbox"/> Google Earth	
		<input checked="" type="checkbox"/> Conventional Survey	
		<input type="checkbox"/> *GPS: Survey-Grade	
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)	
		<input type="checkbox"/> NAD-83	
		<input type="checkbox"/> Other (please specify):	

Land Owner		Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL	
Arizona State Land Department (Mineral Lease #11-026500)		Florence Copper Inc.	
MAILING ADDRESS		MAILING ADDRESS	
1616 W. Adams Street		1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
Phoenix, AZ 85007		Florence, Arizona 85123	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
Lisa Atkins (State Land Commissioner)		Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER	FAX NUMBER	TELEPHONE NUMBER	FAX NUMBER
(602) 542-4631		(520) 374-3984	(520) 374-3999

Drilling Firm		Consultant <i>(if applicable)</i>	
NAME National EWP, INC		CONSULTING FIRM Haley & Aldrich, Inc.	
DWR LICENSE NUMBER 823	ROC LICENSE CATEGORY A-4	CONTACT PERSON NAME Mark Nicholls	
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS jstephens@nationalewp.com	TELEPHONE NUMBER (602) 760-2423	EMAIL ADDRESS MNicholls@haleyaldrich.com

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 133S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 402745

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	45	6.25	0	45	5.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
45	560	5	0	560	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
560	2217	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE										FILTER PACK	
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE	
						GROUT	CHIPS	PELLETS					
0	560	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE										MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATE VOLUME OF MATERIAL (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE		CHIPS	PELLETS			SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	2217	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	106.96
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4:
☐ Variance Option *
☒ Alternative 5:
☐ Variance Option 1*
☐ Variance Option 2*

* requires a letter requesting a variance

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

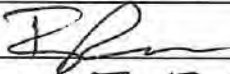
55 - 482745

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 3-13-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

RECEIVED
AUG 24 2018
ADWR

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482745

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S) 4.0 S	RANGE (E/W) 9.0 E	SECTION 28	160 ACRE SW ¼	40 ACRE NE ¼	10 ACRE SE ¼
CITY / STATE / ZIP CODE Florence, AZ 85132		LATITUDE 33 ° Degrees	2 ' Minutes	53.15 "N Seconds	LONGITUDE 111 ° Degrees	26 ' Minutes	7.15 "W Seconds
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
TELEPHONE NUMBER 520-374-3984		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
FAX 520-374-3999	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK		MAP	PARCEL 1001	COUNTY WHERE WELL IS LOCATED PINAL		

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm PRIOR TO the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Hoover Drilling LLC		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Stewart Brothers Drilling	
DWR LICENSE NUMBER 5871		DWR LICENSE NUMBER 314	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (520) 374-3984	FAX	TELEPHONE NUMBER (505) 287-2986	FAX

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE

Ian Ream, Senior Hydrogeologist

SIGNATURE OF WELL OWNER

[Signature]

DATE

8-24-2018

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482745** WELL OWNER ID: 133S

AUTHORIZED DRILLER: **STEWART BROS DRILLING CO DBA SBQ2 LLC**

LICENSE NO: **314**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the **SW** 1/4 of the **SW** 1/4 Section **28** Township **4.0** **SOUTH** Range **9.0** **EAST**

NO. OF WELLS IN THIS PROJECT: **1**

ASSESSOR'S PARCEL NO: **200-31-0200**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF **August 25, 2019**

Sella Munillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

RECEIVED

Well Abandonment Completion Report

OCT / 1 2018

5

- Review instructions prior to completing form
- The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CCA

WELL REGISTRATION NUMBER

55 - 482745

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME STEWART BROS DRILLING CO DBA SBO2 LLC	DWR LICENSE NUMBER 314
	ADDRESS P.O. BOX 2067	TELEPHONE NUMBER 505-287-2986
	CITY / STATE / ZIP MILAN, NM 87021	FAX

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC.	CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrologist
MAILING ADDRESS 1575 W. HUNT HIGHWAY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY) 1575 W. Hunt Highway						LATITUDE 33° 2' 53.15" N Degrees Minutes Seconds		LONGITUDE 111° 26' 7.15" W Degrees Minutes Seconds	
TOWNSHIP (N/S) 4S	RANGE (E/W) 9.0E	SECTION 28	160 ACRE SW 1/4	40 ACRE NE 1/4	10 ACRE SE 1/4	LAND SURFACE ELEVATION AT WELL Feet Above Sea Level			
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 200 MAP 31 PARCEL 0200						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade *If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		No	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	Yes		IF YES, PLEASE STATE 133S Core Hole
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		No	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?		No	3" casing was removed from 0 - 160 ft. Hole was then cemented from 0-605 via tremie pipe
5. Was the well casing video logged?		No	
6. Why was the well abandoned? To accommodate future development of the site.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482745

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	600	5.5	160	600	3"	x				x					Liner	

Condition of casing: ☐ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	600	x										

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER

Feet Below Land Surface

DATE ABANDONMENT COMPLETED

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND		
160	600				x	x	0	600	x										

Actual Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

- CHECK ONE
- ☐ Standard Method ☐ Alternative 4 ☒ Other (please specify)
- ☐ Alternative 1 ☐ Variance Option
- ☐ Alternative 2 ☐ Alternative 5
- ☐ Alternative 3 ☐ Variance Option 1
- ☐ Variance Option 2

- CHECK ONE
- ☐ Gravity
- ☐ Pressure Grouting
- ☒ Tremie Pumped
- ☐ Other (please specify)

REMARKS Drilled beside 3" casing to 600, set charges every 10ft from 150-600. Pump Type V cement via tremi, pull tremi and set off explosive charges. Top 160 removed. Plan was approved by ADWR.

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE
Randy Stewart

SIGNATURE OF QUALIFYING PARTY

9/13/2018

DATE

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well**

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA D-	BASIN PIN	SUBBASIN 11	D(4-9)28CCA
RECEIVED DATE 9-22-2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 9-25-2017	REMEDIAL ACTION SITE 000	55- 482797	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type

CHECK ONE

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Domestic | <input type="checkbox"/> Monitor / Piezometer |
| <input type="checkbox"/> Stock | <input type="checkbox"/> Geotechnical |
| <input type="checkbox"/> Irrigation | <input checked="" type="checkbox"/> Mineral Exploration |
| <input type="checkbox"/> Municipal | <input type="checkbox"/> Other (please specify): |

ORIGINAL WELL OWNER (IF KNOWN)

Conoco

ORIGINAL WELL DRILLING FIRM (IF KNOWN)

Joy

DRILL DATE (IF KNOWN)

November 1971

Location of Well

WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
4.0 S	9.0 E	28	SW ¼	SW ¼	NE ¼

COUNTY ASSESSOR'S PARCEL ID NUMBER	COUNTY WHERE WELL IS LOCATED
BOOK MAP PARCEL	
200 31 020	PINAL

LATITUDE			LONGITUDE		
33 °	2 ' 55.43 "N	111 °	26 ' 6.98 "W		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds

METHOD OF LATITUDE/LONGITUDE (check one)

☐ Google Earth ☒ Conventional Survey ☐ *GPS: Hand-Held

*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)

☐ NAD-83 ☐ Other (please specify):**SECTION 2. OWNER INFORMATION****Land Owner**

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL

Florence Copper Inc.

MAILING ADDRESS

1575 W. Hunt Highway

CITY / STATE / ZIP CODE

Florence, Arizona

CONTACT PERSON NAME AND TITLE

Iam Ream (Senior Hydrogeologist)

TELEPHONE NUMBER

(520) 374-3984

FAX NUMBER

(520) 374-3999

Well Owner (check this box if Land Owner and Well Owner are same) ☒

FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL

Florence Copper Inc.

MAILING ADDRESS

1575 W. Hunt Highway

CITY / STATE / ZIP CODE

Florence, Arizona

CONTACT PERSON NAME AND TITLE

Iam Ream (Senior Hydrogeologist)

TELEPHONE NUMBER

(520) 374-3984

FAX NUMBER

(520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION**Drilling Firm**

NAME

National EWP, INC

DWR LICENSE NUMBER

823

ROC LICENSE CATEGORY

A-4

TELEPHONE NUMBER

(480) 558-3500

EMAIL ADDRESS

jstephens@nationalewp.com

Consultant (if applicable)

CONSULTING FIRM

Haley & Aldrich

CONTACT PERSON NAME

Lauren Candreva

TELEPHONE NUMBER

602-760-2429

EMAIL ADDRESS

lcandreva@haleyaldrich.com

SECTION 4.**Questions**

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 135MF
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?			

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 -

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	65	6.25	0	65	5.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
65	376	5	0	376	5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
376	2095.5	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	376	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	GROUT	CHIPS			PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	2095.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	100.93
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 -

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE <u>Ian Ream</u>	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER 	SIGNATURE OF WELL OWNER
DATE <u>9-21-2017</u>	DATE <u>9-21-2017</u>
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS <u>ianream@florencecopper.com</u>



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ You **must** include with your Notice:
 - check or money order for any required fee(s)
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

**** PLEASE PRINT CLEARLY ****

Well ID: 135MF

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482797

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SW ¼	SW ¼	NE ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° Degrees	2 ' Minutes	55.43 "N Seconds	LONGITUDE 111 ° Degrees	26 ' Minutes	6.98 "W Seconds
TELEPHONE NUMBER 520-374-3984		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade			COUNTY WHERE WELL IS LOCATED PINAL		
FAX 520-374-3999		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL					
		200 31 020					

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR TO** the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Ian Ream, Sr. Hydrogeologist

SIGNATURE OF WELL OWNER

IAR

DATE

1-2-2018



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CCA

WELL REGISTRATION NUMBER

55 - 482797

SECTION 1: WELL ABANDONMENT AUTHORIZATION		
Drilling Firm		
Mail To:	NAME LAYNE CHRISTENSEN COMPANY	DWR LICENSE NUMBER 7
	ADDRESS 12030 EAST RIGGS ROAD	TELEPHONE NUMBER 480-695-9336
	CITY / STATE / ZIP CHANDLER, AZ 85249-3701	FAX

SECTION 2: WELL INFORMATION						
Well Owner Information						
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC				CONTACT PERSON NAME AND TITLE Ian Ream Senior Hydrogeologist		
MAILING ADDRESS 1675 W. HUNT HWY.				TELEPHONE NUMBER 520-374-3984		
CITY / STATE / ZIP FLORENCE, AZ 85132				FAX 520-374-3999		
Location of Well						
WELL LOCATION ADDRESS (IF ANY)				LATITUDE 33 ° 2 ' 55.43" N Degrees Minutes Seconds		LONGITUDE 111 ° 26 ' 6.98" W Degrees Minutes Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL 1475 Feet Above Sea Level
4.0 S	9.0 E	28	SW 1/4	SW 1/4	NE 1/4	METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade
COUNTY ASSESSOR'S PARCEL ID NUMBER			*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)			
BOOK 200	MAP 31	PARCEL 020	<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			

SECTION 3: WELL ABANDONMENT QUESTIONS			
Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 135MF
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482797

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (Inches)	DEPTH FROM SURFACE		OUTER DIAMETER (Inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (Inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	65	6.25	0	65	5.5	X										
65	376	5	0	376	5	X										
376	470	2.97														

Condition of casing: ☐ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	376			X								
376	470			X								

Refer to ADWR's Well Abandonment Handbook for additional information							DEPTH TO WATER Feet Below Land Surface		DATE ABANDONMENT COMPLETED									
Casing Treatment							Sealing or Fill Material											
DEPTH FROM SURFACE		TREATMENT TYPE (T)					DEPTH FROM SURFACE		MATERIAL TYPE (T)									
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS	SAND	MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)	
0	5				X		5	470	X								14.3	64.05
5	25					Blast - Perf												

Actual Abandonment Method (See Well Abandonment Handbook)			Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2			CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE Scott Graham	SIGNATURE OF QUALIFYING PARTY [Signature] DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
REISSUE-VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482797** WELL OWNER ID: 135MF

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the SW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

ASSESSOR'S PARCEL NO: **200-31-020**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.



**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well****FEE
\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR		FILE NUMBER
AMA/INA Pinal	BASIN PIN	SUBBASIN 11
RECEIVED DATE 7/19/2017	WATERSHED 08 UGR	WELL REGISTRATION NUMBER 55- 482774
ISSUED DATE 7/14/2017	REMEDIAL ACTION SITE 000	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well	
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS	
<input type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):			
ORIGINAL WELL OWNER (IF KNOWN) Conoco		TOWNSHIP (N/S) 4.0 S	
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		RANGE (E/W) 9.0 E	
		SECTION 28	
		160 ACRE SW 1/4	
		40 ACRE SE 1/4	
		10 ACRE NW 1/4	
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 200 MAP 31 PARCEL 0200	
		COUNTY WHERE WELL IS LOCATED PINAL	
		LATITUDE 33 ° 2 ' 55.13 "N	
		LONGITUDE 111 ° 26 ' 1.35 "W	
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held	
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade	
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)	
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input checked="" type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Inc.	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1575 W. Hunt Hwy	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Florence, Arizona 85123	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (520) 374-3984	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER (520) 374-3999	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
TELEPHONE NUMBER (480) 558-3500	TELEPHONE NUMBER (602) 760-2423
ROC LICENSE CATEGORY A-4	EMAIL ADDRESS MNicholls@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 145MF
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 462774

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	60	6.25	0	60	5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
60	400	5	0	400	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
400	2170	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	400	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

03/01/2017

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE										MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT	CHIPS	PELLETS			SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	2170	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	104.54
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Native backfill	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

CHECK ONE
☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4:
☐ Variance Option *
☒ Alternative 5:
☐ Variance Option 1*
☐ Variance Option 2*
 * requires a letter requesting a variance

CHECK ONE
☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

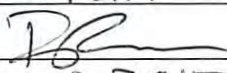
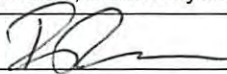
55 - 462774

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE Ian Ream	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER 	SIGNATURE OF WELL OWNER 
DATE 7-10-2017	DATE 7-10-2017
<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 145MF

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482774

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SW ¼	SE ¼	NW ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° Degrees	2 ' Minutes	55.13 "N Seconds	LONGITUDE 111 ° Degrees	26 ' Minutes	1.35 "W Seconds
TELEPHONE NUMBER 520-374-3984		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade				*GPS: Hand-Held	
FAX 520-374-3999		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL			COUNTY WHERE WELL IS LOCATED		
		200 31 020			PINAL		

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm PRIOR TO the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Ian Ream, Sr. Hydrogeologist

SIGNATURE OF WELL OWNER

DATE

[Signature] 1-2-2018



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CDB

WELL REGISTRATION NUMBER

55 - 482774

SECTION 1 - ABANDONMENT AUTHORIZATION		
Drilling Firm		
Mail To:	NAME LAYNE CHRISTENSEN COMPANY	DWR LICENSE NUMBER 7
	ADDRESS 12030 EAST RIGGS ROAD	TELEPHONE NUMBER 480-895-9336
	CITY / STATE / ZIP CHANDLER, AZ 85249-3701	FAX

SECTION 2 - REGISTRY INFORMATION																			
Well Owner Information																			
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC.	CONTACT PERSON NAME AND TITLE Ian Ream Senior Geologist																		
MAILING ADDRESS 1575 W. HUNT HIGHWAY	TELEPHONE NUMBER 520-374-3984																		
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999																		
Location of Well																			
WELL LOCATION ADDRESS (IF ANY)	<table border="1"> <tr> <td colspan="3">LATITUDE</td> <td colspan="3">LONGITUDE</td> </tr> <tr> <td>33 °</td> <td>2</td> <td>55.13 "N</td> <td>111</td> <td>26</td> <td>1.35 "W</td> </tr> <tr> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> </tr> </table>	LATITUDE			LONGITUDE			33 °	2	55.13 "N	111	26	1.35 "W	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
LATITUDE			LONGITUDE																
33 °	2	55.13 "N	111	26	1.35 "W														
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds														
<table border="1"> <tr> <td>TOWNSHIP (N/S)</td> <td>RANGE (E/W)</td> <td>SECTION</td> <td>160 ACRE</td> <td>40 ACRE</td> <td>10 ACRE</td> </tr> <tr> <td>4.0 S</td> <td>9.0 E</td> <td>28</td> <td>SW 1/4</td> <td>SE 1/4</td> <td>NW 1/4</td> </tr> </table>	TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	4.0 S	9.0 E	28	SW 1/4	SE 1/4	NW 1/4	LAND SURFACE ELEVATION AT WELL <div style="text-align: right;">Feet Above Sea Level</div>						
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE														
4.0 S	9.0 E	28	SW 1/4	SE 1/4	NW 1/4														
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 200 MAP 31 PARCEL 020	METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade *If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):																		

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 145MF
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	if no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate
5. Was the well casing video logged?		X	
6. Why was the well abandoned? <div style="text-align: center;">No longer needed</div>			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482774

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	60	6.25	0	60	5	X										
60	400	5	0	400	3	X										


Condition of casing: ☐ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	400			X								

Refer to ADWR's Well Abandonment Handbook for additional information											DEPTH TO WATER Feet Below Land Surface		DATE ABANDONMENT COMPLETED 1-22-2018			
Casing Treatment						Sealing or Fill Material										
DEPTH FROM SURFACE		TREATMENT TYPE (T)					DEPTH FROM SURFACE		MATERIAL TYPE (T)					MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT			HIGH SOLIDS
0	5				X		0	5								
							5	2170							Native	1:1 104.54

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	
Blast and Perforate Type V Cement					

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE Scott H Graham	SIGNATURE OF QUALIFYING PARTY  DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482774** WELL OWNER ID: 145MF

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NW 1/4 of the SE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

ASSESSOR'S PARCEL NO: **200-31-020**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.




Arizona Department of Water Resources

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

MAR 15 2017

ADWR

**Notice of Intention to
Abandon a Well**
**FEE
\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR		FILE NUMBER
AMATA/D -	BASIN PIN	11
RECEIVED DATE 3-15-2017	WATERSHED 08	WELL REGISTRATION NUMBER
ISSUED DATE 3-16-2017	REMEDIAL ACTION SITE 600	55- 482746

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well							
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS							
<input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal		<input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify):							
ORIGINAL WELL OWNER (IF KNOWN)		TOWNSHIP (N/S)		RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	
Conoco		4.0 S		9.0 E	28	SW 1/4	NE 1/4	SW 1/4	
ORIGINAL WELL DRILLING FIRM (IF KNOWN)		COUNTY ASSESSOR'S PARCEL ID NUMBER		COUNTY WHERE WELL IS LOCATED					
Joy		BOOK MAP PARCEL		1001		PINAL			
DRILL DATE (IF KNOWN)		LATITUDE		LONGITUDE					
February 1972		33 ° 3 ' 3.62 "N		111 ° 26 ' 1.26 "W					
		Degrees Minutes Seconds		Degrees Minutes Seconds					
		METHOD OF LATITUDE/LONGITUDE (check one)		<input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Land Owner		Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL	
Arizona State Land Department (Mineral Lease #11-026500)		Florence Copper Inc.	
MAILING ADDRESS		MAILING ADDRESS	
1616 W. Adams Street		1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
Phoenix, AZ 85007		Florence, Arizona 85123	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
Lisa Atkins (State Land Commissioner)		Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER	FAX NUMBER	TELEPHONE NUMBER	FAX NUMBER
(602) 542-4631		(520) 374-3984	(520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME		CONSULTING FIRM	
National EWP, INC		Haley & Aldrich, Inc.	
DWR LICENSE NUMBER	ROC LICENSE CATEGORY	CONTACT PERSON NAME	
823	A-4	Mark Nicholls	
TELEPHONE NUMBER	EMAIL ADDRESS	TELEPHONE NUMBER	EMAIL ADDRESS
(480) 558-3500	jstephens@nationalewp.com	(602) 760-2423	MNicholls@haleyaldrich.com

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 149S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482746

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	40	6.25	0	40	5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40	601	5	0	601	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
601	2142.5	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE								FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	601	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	VARIANCE GRANTED	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE					DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
		SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED			NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE					SAND	
FROM (feet)	TO (feet)						GROUT	CHIPS						PELLETS						
FROM (feet)	TO (feet)						FROM (feet)	TO (feet)												
0	5				X		5	2142.5	X										1:1	103.42

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

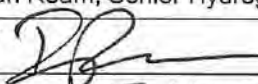
55 - 482746

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 3.14.2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482746 WELL OWNER ID: 149S

AUTHORIZED DRILLER: NATIONAL EWP, INC.

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SW 1/4 of the NE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
www.azwater.gov

Well Abandonment Completion Report

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

**** PLEASE PRINT CLEARLY ****

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482746

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME	National EWP	DWR LICENSE NUMBER	823
	ADDRESS	1200 W San Pedro St	TELEPHONE NUMBER	480-558-3500
	CITY / STATE / ZIP	Gilbert, AZ 85233	FAX	480-558-3525

RECEIVED

FEB 6 - 2018

ARIZONA DEPARTMENT OF WATER RESOURCES

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	CONTACT PERSON NAME AND TITLE
Florence Copper Inc.	Ian Ream Sr. Hydrologist
MAILING ADDRESS	TELEPHONE NUMBER
1575 W. Hunt Highway	520-374-3984
CITY / STATE / ZIP CODE	FAX
Florence, AZ 85132	520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE			LONGITUDE		
						Degrees Minutes Seconds "N			Degrees Minutes Seconds "W		
						1475			Feet Above Sea Level		
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	METHOD OF LATITUDE/LONGITUDE (CHECK ONE)					
4S	9E	28	SW ¼	NE ¼	SW ¼	<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held					
COUNTY ASSESSOR'S PARCEL ID NUMBER						*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE)					
BOOK		MAP		PARCEL		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (ATTACH ADDITIONAL PAGE IF NECESSARY)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 149-S
3. Prior to abandonment, did the well have 20' of surface casing AND 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		
5. Was the well casing video logged?		X	
6. Why was the well abandoned?	No longer needed.		

Well Abandonment Completion Report

WELL REGISTRATION NUMBER

55 - 482746

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)			PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE		SLOTTED
0	639	4	0	639	3	X									

Condition of casing: ☐ Good ☐ Fair ☐ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)								FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	639			X								

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information.

DEPTH TO WATER

N/A Feet Below Land Surface

DATE ABANDONMENT COMPLETED

8.8.17

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				DEPTH FROM SURFACE		MATERIAL TYPE (T)								MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	SAND			
0	639				X	grout & blast	5	639							x		15.2	44.9

Actual Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method☐ Alternative 4:☒ Other (please specify):☐ Alternative 1☐ Variance Option

grout & blast

☐ Alternative 2☐ Alternative 5:

Type V Cement

☐ Alternative 3☐ Variance Option 1☐ Variance Option 2**Emplacement Method of Sealing or Fill Material**

CHECK ONE

☐ Gravity☐ Pressure Grouting☒ Tremie Pumped☐ Other (please specify):

REMARKS

I state that this notice is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE

William Edol

SIGNATURE OF QUALIFYING PARTY

[Signature]

DATE

2-1-18

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well**

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR

AMA/INA D-	BASIN PIN	SUBBASIN 11
RECEIVED DATE 9-22-2017	WATERSHED 08	
ISSUED DATE 10-11-2017	REMEDIAL ACTION SITE 000	

FILE NUMBER

D(4-9)28 DAD
WELL REGISTRATION NUMBER
55- 482792

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type

CHECK ONE

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Domestic | <input type="checkbox"/> Monitor / Piezometer |
| <input type="checkbox"/> Stock | <input type="checkbox"/> Geotechnical |
| <input type="checkbox"/> Irrigation | <input checked="" type="checkbox"/> Mineral Exploration |
| <input type="checkbox"/> Municipal | <input type="checkbox"/> Other (please specify): |

ORIGINAL WELL OWNER (IF KNOWN)

Conoco

ORIGINAL WELL DRILLING FIRM (IF KNOWN)

Unknown

DRILL DATE (IF KNOWN)

Unknown

Location of Well

WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
4.0 S	9.0 E	28	SE 1/4	NE 1/4	SE 1/4
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK	MAP	PARCEL	COUNTY WHERE WELL IS LOCATED		
		1001	PINAL		

LATITUDE

LONGITUDE

33 °	3 '	3.49 "N	111 °	25 '	20.15" W
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds

METHOD OF LATITUDE/LONGITUDE (check one)

☐ *GPS: Hand-Held☐ Google Earth☒ Conventional Survey☐ *GPS: Survey-Grade

*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)

☐ NAD-83☐ Other (please specify):**SECTION 2. OWNER INFORMATION****Land Owner**

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL

Arizona State Land Department (Mineral Lease #11-026500)

MAILING ADDRESS

1616 W. Adams Street

CITY / STATE / ZIP CODE

Phoenix, AZ 85007

CONTACT PERSON NAME AND TITLE

Lisa Atkins (State Land Commissioner)

TELEPHONE NUMBER

(602) 542-4631

FAX NUMBER

Well Owner (check this box if Land Owner and Well Owner are same) ☐

FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL

Florence Copper Inc.

MAILING ADDRESS

1575 W. Hunt Hwy

CITY / STATE / ZIP CODE

Florence, Arizona 85123

CONTACT PERSON NAME AND TITLE

Ian Ream (Senior Hydrogeologist)

TELEPHONE NUMBER

(520) 374-3984

FAX NUMBER

(520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION**Drilling Firm**

NAME

National EWP, INC

DWR LICENSE NUMBER

823

ROC LICENSE CATEGORY

A-4

TELEPHONE NUMBER

(480) 558-3500

EMAIL ADDRESS

jstephens@nationalewp.com

Consultant (if applicable)

CONSULTING FIRM

Haley & Aldrich, Inc.

CONTACT PERSON NAME

Lauren Candrea

TELEPHONE NUMBER

602-760-2429

EMAIL ADDRESS

lcandrea@haleyaldrich.com

SECTION 4.**Questions**

Yes

No

If Yes:

1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?

☐☒

EXPLAIN (attach additional page if necessary)

2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)

☒☐(please state)
162S

3. Was the well casing video logged?

☐☒

INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT

4. Why is the well being abandoned?

No longer in use

VARIANCE GRANTED

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 - 402792

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	50	6.25	0	50	5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50	300	5	0	300	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
300	990	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	300	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE							MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE			SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	990	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	47.7
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

CHECK ONE

☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):

☐ Alternative 1 ☐ Variance Option *

☐ Alternative 2 ☒ Alternative 5:

☐ Alternative 3 ☐ Variance Option 1* ☐ Variance Option 2*

* requires a letter requesting a variance

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 - 482792

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER Authorized under Mineral Lease # 11-026500	SIGNATURE OF WELL OWNER 
DATE	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 162S

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482792

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SE ¼	NE ¼	SE ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° Degrees	3 ' Minutes	3.49 "N Seconds	LONGITUDE 111 ° Degrees	25 ' Minutes	20.15 "W Seconds
TELEPHONE NUMBER 520-374-3984		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade			COUNTY WHERE WELL IS LOCATED		
FAX 520-374-3999		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			COUNTY ASSESSOR'S PARCEL ID NUMBER		
		BOOK 200	MAP 31	PARCEL 020	PINAL		

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm PRIOR TO the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Ian Ream, Sr. Hydrogeologist

SIGNATURE OF WELL OWNER

DATE



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 DAD

WELL REGISTRATION NUMBER

55 - 482792

Section 1: Drilling Firm Information		
Mail To:	NAME LAYNE CHRISTENSEN COMPANY	DWR LICENSE NUMBER 7
	ADDRESS 12030 EAST RIGGS ROAD	TELEPHONE NUMBER 480-895-9336
	CITY / STATE / ZIP CHANDLER, AZ 85249-3701	FAX

Section 2: Well Owner Information	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC	CONTACT PERSON NAME AND TITLE Ian Ream Senior Hydrogeologist
MAILING ADDRESS 1575 W. HUNT HWY.	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999

Section 3: Location of Well						
WELL LOCATION ADDRESS (IF ANY)				LATITUDE 33° 3' 3.49" N Degrees Minutes Seconds		LONGITUDE 111° 25' 20.15" W Degrees Minutes Seconds
TOWNSHIP (N/S) 4.0 S	RANGE (E/W) 9.0 E	SECTION 28	160 ACRE SE 1/4	40 ACRE NE 1/4	10 ACRE SE 1/4	LAND SURFACE ELEVATION AT WELL 1470 Feet Above Sea Level
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 200 MAP 31 PARCEL 020				METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade		
				*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):		

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 162S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		
5. Was the well casing video logged?		X	
6. Why was the well abandoned? <div style="text-align: center;">No longer needed</div>			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482792

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	50	6.25	0	50	5	X										
50	300	5	0	300	3	X										
300	990	2.97														

Condition of casing: ☐ Good ☐ Fair ☒ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	300				X							

Refer to ADWR's Well Abandonment Handbook for additional information										DEPTH TO WATER N/A Feet Below Land Surface		DATE ABANDONMENT COMPLETED 1-29-2018							
Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS					
0	5				X		5	990	X										
5	25					Blast Perforate													

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify) Blast & Perforate	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE Scott Graham Driller	SIGNATURE OF QUALIFYING PARTY [Signature] DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482792** WELL OWNER ID: 162S

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SE 1/4 of the NE 1/4 of the SE 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF **September 23, 2018**

Sella Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.



**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well****FEE
\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA D -	BASIN PIN	SUBBASIN 11	D (4-9) 28 DAD
RECEIVED DATE 9-22-2017	WATERSHED 83		WELL REGISTRATION NUMBER
ISSUED DATE 10-11-2017	REMEDIAL ACTION SITE 000		55- 482790

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer	TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical	4.0 S	9.0 E	28	SE 1/4	NE 1/4	SE 1/4
<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Mineral Exploration	COUNTY ASSESSOR'S PARCEL ID NUMBER		COUNTY WHERE WELL IS LOCATED			
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):	BOOK	MAP	PARCEL	PINAL		
ORIGINAL WELL OWNER (IF KNOWN)		LATITUDE					
Conoco		LONGITUDE					
ORIGINAL WELL DRILLING FIRM (IF KNOWN)		33 °		3 ' 4.17 "N		111 ° 25 ' 23.07" W	
Unknown		Degrees		Minutes		Seconds	
DRILL DATE (IF KNOWN)		METHOD OF LATITUDE/LONGITUDE (check one)					
Unknown		<input type="checkbox"/> *GPS: Hand-Held					
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Land Owner		Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
Arizona State Land Department (Mineral Lease #11-026500)		Florence Copper Inc.	
MAILING ADDRESS		MAILING ADDRESS	
1616 W. Adams Street		1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
Phoenix, AZ 85007		Florence, Arizona 85123	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
Lisa Atkins (State Land Commissioner)		Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER	FAX NUMBER	TELEPHONE NUMBER	FAX NUMBER
(602) 542-4631		(520) 374-3984	(520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME		CONSULTING FIRM	
National EWP, INC		Haley & Aldrich, Inc.	
DWR LICENSE NUMBER	ROC LICENSE CATEGORY	CONTACT PERSON NAME	
823	A-4	Lauren Candreva	
TELEPHONE NUMBER	EMAIL ADDRESS	TELEPHONE NUMBER	EMAIL ADDRESS
(480) 558-3500	jstephens@nationalewp.com	602-760-2429	lcandreva@haleyaldrich.com

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 325S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

VARIANCE GRANTED

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 402790

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.25	0	40	5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	332.5	5	0	332.5	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
332.5	1093	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	332.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE				IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT	CHIPS			PELLETS	SAND
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	1093	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	52.7
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

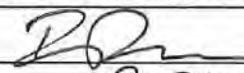
55 - 402790

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER Authorized under Mineral Lease # 11-026500	SIGNATURE OF WELL OWNER 
DATE	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You **must** include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 325S

FILE NUMBER

WELL REGISTRATION NUMBER
55 - 482790

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SE ¼	NE ¼	SE ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° Degrees	3 ' Minutes	4.17 "N Seconds	LONGITUDE 111 ° Degrees	25 ' Minutes	23.07 "W Seconds
TELEPHONE NUMBER 520-374-3984		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):				<input type="checkbox"/> *GPS: Survey-Grade	
FAX 520-374-3999		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL				COUNTY WHERE WELL IS LOCATED PINAL	

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR TO** the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823	DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4	
TELEPHONE NUMBER (480) 558-3500	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536	

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Ian Ream, Sr. Hydrogeologist

SIGNATURE OF WELL OWNER

DATE

[Signature] 1-2-2019



Arizona Department of Water Resources
Groundwater Permitting and Wells
 PO Box 36020 • Phoenix, Arizona 85067-6020
 (602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 DAA

WELL REGISTRATION NUMBER

55 - 482790

SECTION 1: ABANDONMENT AUTHORIZATION

Drilling Firm		
Mail To:	NAME	DWR LICENSE NUMBER
	LAYNE CHRISTENSEN COMPANY	7
	ADDRESS	TELEPHONE NUMBER
	12030 EAST RIGGS ROAD	480-895-9336
	CITY / STATE / ZIP	FAX
	CHANDLER, AZ 85249-3701	

Well Owner Information						
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL				CONTACT PERSON NAME AND TITLE		
FLORENCE COPPER, INC.				Ian Ream Sr. Geologist		
MAILING ADDRESS				TELEPHONE NUMBER		
1575 W. HUNT HIGHWAY				520-374-3984		
CITY / STATE / ZIP				FAX		
FLORENCE, AZ 85132				520-374-3999		
Location of Well						
WELL LOCATION ADDRESS (IF ANY)				LATITUDE		LONGITUDE
				33° 3' 4.17" N		111° 25' 23.07" W
				Degrees Minutes Seconds		Degrees Minutes Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	180 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL
4.0 S	9.0E	28	SE 1/4	NE 1/4	NE 1/4	Feet Above Sea Level
COUNTY ASSESSOR'S PARCEL ID NUMBER				METHOD OF LATITUDE / LONGITUDE (Check One)		
BOOK		MAP		<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> GPS: Survey-Grade		
PARCEL				*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)		
				<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):		

SECTION 3			
Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 325S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate 5'-25'
5. Was the well casing video logged?		X	
6. Why was the well abandoned?			
Well is no longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER

55 - 482790

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.25	0	40	5	X									
40	332.5	5	0	332.5	3	X									
332.5	1093	2.97													

Condition of casing: ☐ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	332.5				X							

Refer to ADWR's Well Abandonment Handbook for additional Information

DEPTH TO WATER

Feet Below Land Surface

DATE ABANDONMENT COMPLETED

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS				
0	5				X		5	1093	X									
5	25					Blast & Perf												

Actual Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

CHECK ONE

☐ Standard Method☐ Alternative 1☐ Alternative 2☐ Alternative 3☐ Alternative 4☐ Variance Option☒ Alternative 5☐ Variance Option 1☐ Variance Option 2☐ Other (please specify)

Blast & Perforate

CHECK ONE

☐ Gravity☐ Pressure Grouting☒ Tremie Pumped☐ Other (please specify)

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

Scott Graham

SIGNATURE OF QUALIFYING PARTY

[Signature]

DATE

3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
REISSUE-VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482790** WELL OWNER ID: 325S

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SE 1/4 of the **NE** 1/4 of the **SE** 1/4 Section **28** Township **4.0** **SOUTH** Range **9.0** **EAST**

NO. OF WELLS IN THIS PROJECT: **1**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF **September 23, 2018**



GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





Arizona Department of Water Resources

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

Notice of Intention to Abandon a Well

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA D-	BASIN PIN	SUBBASIN 11	D(4-9) 28 DAA
RECEIVED DATE 9-22-2017	WATERSHED 88	WELL REGISTRATION NUMBER	
ISSUED DATE 10-11-2017	REMEDIAL ACTION SITE 000	55- 482787	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer						
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical						
<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Mineral Exploration						
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):						
ORIGINAL WELL OWNER (IF KNOWN) Conoco							
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Unknown		DRILL DATE (IF KNOWN) Unknown					
		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
		4.0 S	9.0 E	28	SE 1/4	NE 1/4	NE 1/4
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL	COUNTY WHERE WELL IS LOCATED				
			PINAL				
		LATITUDE			LONGITUDE		
		33 °	3 ' 5.65 "N	111 °	25 ' 24.54 "W		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held					
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Lauren Candreva
ROC LICENSE CATEGORY A-4	TELEPHONE NUMBER 602-760-2429
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS lcandreva@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 337S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482787

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	45	6.25	0	45	5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45	300	5	0	300	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
300	1368	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	300	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	SAND			
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	1368	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	65.86
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

CHECK ONE

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER


55 - 402787

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER Authorized under Mineral Lease # 11-026500	SIGNATURE OF WELL OWNER 
DATE	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 337S

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482787

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SE ¼	NE ¼	NE ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° Degrees	3 ' Minutes	5.65 "N Seconds	LONGITUDE 111 ° Degrees	25 ' Minutes	24.54 "W Seconds
TELEPHONE NUMBER 520-374-3984		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade			*GPS: Hand-Held		
FAX 520-374-3999		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			COUNTY WHERE WELL IS LOCATED PINAL		
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL					

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR** TO the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

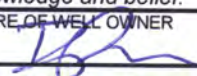
EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE Ian Ream, Sr. Hydrogeologist	SIGNATURE OF WELL OWNER 	DATE 1-2-2018
--	---	------------------



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 DAA

WELL REGISTRATION NUMBER

55 - 482787

SECTION 1: ABANDONMENT AUTHORIZATION		
Drilling Firm		
Mail To:	NAME LAYNE CHRISTENSEN COMPANY	DWR LICENSE NUMBER 7
	ADDRESS 12030 EAST RIGGS ROAD	TELEPHONE NUMBER 480-895-9336
	CITY / STATE / ZIP CHANDLER, AZ 85249-3701	FAX

SECTION 2: REGISTRY INFORMATION					
Well Owner Information					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC		CONTACT PERSON NAME AND TITLE Ian Ream SR Geologist			
MAILING ADDRESS 1675 W. HUNT HWY.		TELEPHONE NUMBER 520-374-3984			
CITY / STATE / ZIP FLORENCE, AZ 85132		FAX 520-374-3999			
Location of Well					
WELL LOCATION ADDRESS (IF ANY)		LATITUDE 33° 3' 56.5" N Degrees Minutes Seconds		LONGITUDE 111° 25' 24.54" W Degrees Minutes Seconds	
TOWNSHIP (N/S) 4.0 S	RANGE (E/W) 9.0 E	SECTION 28	160 ACRE SE 1/4	40 ACRE NE 1/4	10 ACRE NE 1/4
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL		LAND SURFACE ELEVATION AT WELL Feet Above Sea Level			
		METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade			
		*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MVV-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 337S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast and Perforate 5' - 25'
5. Was the well casing video logged?		X	
6. Why was the well abandoned? Well no longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482787

SECTION 4 - ORIGINAL WELL CONSTRUCTION DESIGN (attach additional pages if needed)															
Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	45	6.25	0	45	5	X									
45	300	5	0	300	3	X									
300	1368	2.97													

Condition of casing: ☒ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	300				X							

Refer to ADWR's Well Abandonment Handbook for additional information	DEPTH TO WATER Feet Below Land Surface	DATE ABANDONMENT COMPLETED 2-7-2018
--	---	--

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS					
0	5				X		5	1368	X										
5	25				Blast-Perf														

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material			
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)			
Blast & Perforate Type 5 V Cement							

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE Scott Graham	SIGNATURE OF QUALIFYING PARTY [Signature] DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482787** WELL OWNER ID: 337S

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the NE 1/4 of the SE 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF **September 23, 2018**

Sella Munillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.



**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well****FEE
\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA D -	BASIN PIN	SUBBASIN 11	D(4-9)28DAA
RECEIVED DATE 9-22-2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 10-11-2017	REMEDIAL ACTION SITE 000	55- 482789	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://qisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type

CHECK ONE

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Domestic | <input type="checkbox"/> Monitor / Piezometer |
| <input type="checkbox"/> Stock | <input type="checkbox"/> Geotechnical |
| <input type="checkbox"/> Irrigation | <input checked="" type="checkbox"/> Mineral Exploration |
| <input type="checkbox"/> Municipal | <input type="checkbox"/> Other (please specify): |

ORIGINAL WELL OWNER (IF KNOWN)

Conoco

ORIGINAL WELL DRILLING FIRM (IF KNOWN)

Unknown

DRILL DATE (IF KNOWN)

Unknown

Location of Well

WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
4.0 S	9.0 E	28	SE ¼	NE ¼	NE ¼

COUNTY ASSESSOR'S PARCEL ID NUMBER	COUNTY WHERE WELL IS LOCATED
BOOK MAP PARCEL	PINAL
	1001

LATITUDE			LONGITUDE		
33 °	3 '	8.07 "N	111 °	25 '	23.08 "W
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds

METHOD OF LATITUDE/LONGITUDE (check one) ☐ *GPS: Hand-Held
☐ Google Earth ☒ Conventional Survey ☐ *GPS: Survey-Grade

*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)

☐ NAD-83 ☐ Other (please specify):**SECTION 2. OWNER INFORMATION****Land Owner**

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL

Arizona State Land Department (Mineral Lease #11-026500)

MAILING ADDRESS

1616 W. Adams Street

CITY / STATE / ZIP CODE

Phoenix, AZ 85007

CONTACT PERSON NAME AND TITLE

Lisa Atkins (State Land Commissioner)

TELEPHONE NUMBER

(602) 542-4631

FAX NUMBER

Drilling Firm

NAME

National EWP, INC

DWR LICENSE NUMBER

823

ROC LICENSE CATEGORY

A-4

TELEPHONE NUMBER

(480) 558-3500

EMAIL ADDRESS

jstephens@nationalewp.com

Well Owner (check this box if Land Owner and Well Owner are same) ☐

FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL

Florence Copper Inc.

MAILING ADDRESS

1575 W. Hunt Hwy

CITY / STATE / ZIP CODE

Florence, Arizona 85123

CONTACT PERSON NAME AND TITLE

Ian Ream (Senior Hydrogeologist)

TELEPHONE NUMBER

(520) 374-3984

FAX NUMBER

(520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION**Drilling Firm**

NAME

National EWP, INC

DWR LICENSE NUMBER

823

ROC LICENSE CATEGORY

A-4

TELEPHONE NUMBER

(480) 558-3500

EMAIL ADDRESS

jstephens@nationalewp.com

Consultant (if applicable)

CONSULTING FIRM

Haley & Aldrich, Inc.

CONTACT PERSON NAME

Lauren Candrea

TELEPHONE NUMBER

602-760-2429

EMAIL ADDRESS

lcandrea@haleyaldrich.com

SECTION 4.**Questions**

Yes

No

If Yes:

1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?

☐☒

EXPLAIN (attach additional page if necessary)

2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)

☒☐

(please state)

338S

3. Was the well casing video logged?

☐☒

INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT

4. Why is the well being abandoned?

No longer in use

VARIANCE GRANTED

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 -

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.25	0	40	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	330	5	0	330	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) UNKNOWN

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	330	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment					Sealing or Fill Material																
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	330	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	15.95
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

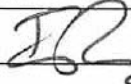
55 -

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER Authorized under Mineral Lease # 11-026500	SIGNATURE OF WELL OWNER 
DATE	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 338S

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482789

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SE ¼	NE ¼	NE ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° Degrees	3 ' Minutes	8.07 "N Seconds	LONGITUDE 111 ° Degrees	25 ' Minutes	23.08 "W Seconds
TELEPHONE NUMBER 520-374-3984		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held			*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):		
FAX 520-374-3999		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL			COUNTY WHERE WELL IS LOCATED PINAL		

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR** TO the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Ian Ream, Sr. Hydrogeologist

SIGNATURE OF WELL OWNER

[Signature] 1-2-2018 DATE



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-0020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CBD

WELL REGISTRATION NUMBER

55 -482789

ABANDONMENT AUTHORIZATION	
Name To:	NAME LAYNE CHRISTENSEN COMPANY
	ADDRESS 12030 EAST RIGGS ROAD
	CITY / STATE / ZIP CHANDLER, AZ 85248-3701
	DWR LICENSE NUMBER 7
	TELEPHONE NUMBER 480-885-8336
	FAX

SECTION 2: SECRETARY INFORMATION									
Well Owner Information					CONTACT PERSON NAME AND TITLE				
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC.					Ian Ream Senior Geologist				
MAILING ADDRESS 1575 W. HUNT HIGHWAY					TELEPHONE NUMBER 520-374-3984				
CITY / STATE / ZIP FLORENCE, AZ 85132					FAX 520-374-3999				
Location of Well									
WELL LOCATION ADDRESS (IF ANY)					LATITUDE 33° 2' 58.00" N Degrees Minutes Seconds		LONGITUDE 111° 25' 49.00" W Degrees Minutes Seconds		
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL 1490' Feet Above Sea Level			
4S	9E	28	SW _{1/4}	NE _{1/4}	SW _{1/4}	METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held			
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL			1001			<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade			
						*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 338S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate 5' - 25'
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55-482789

SECTION A. ORIGINAL WELL CONSTRUCTION DESIGN (Check one of the following)																
Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE			DEPTH FROM SURFACE			MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)	BOREHOLE DIAMETER (inches)	FROM (feet)	TO (feet)	OUTER DIAMETER (inches)	STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	40	6.5	0	40	5.6	X				X						
40	330	6	40	330	3	X				X						

Condition of casing: ☐ Good ☐ Fair ☒ Poor

SECTION B. ANNULAR MATERIAL (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	330	X										

SECTION C. ABANDONMENT DESIGN																		
Refer to ADWR's Well Abandonment Handbook for additional information						DEPTH TO WATER N/A Feet Below Land Surface		DATE ABANDONMENT COMPLETED 1-9-2018										
Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				DEPTH FROM SURFACE		MATERIAL TYPE (T)					MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT TYPE	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT			SAND-BENTONITE GROUT	HIGH SOLIDS		
0	5				Remove		0	330	X									
5	40				Blast Perf													

Abandonment Method (See Well Abandonment Handbook)				Sealing or Fill Material			
CHECK ONE		Alternative 4		Other (please specify)		CHECK ONE	
<input type="checkbox"/> Standard Method	<input type="checkbox"/> Alternative 1	<input type="checkbox"/> Alternative 2	<input type="checkbox"/> Alternative 3	<input type="checkbox"/> Variance Option	<input type="checkbox"/> Variance Option 1	<input type="checkbox"/> Variance Option 2	<input type="checkbox"/> Gravity
				Grout & Blast Type V Cement		<input type="checkbox"/> Pressure Grouting	
						<input checked="" type="checkbox"/> Tremie Pumped	
						<input type="checkbox"/> Other (please specify)	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-604 and A.A.C. R12-15-818 and is complete and correct to the best of my knowledge and		
TYPE OR PRINT NAME AND TITLE Scott Graham	SIGNATURE OF QUALIFYING PARTY [Signature]	DATE 3/18/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482789** WELL OWNER ID: 338S

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the NE 1/4 of the SE 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF **September 23, 2018**

Sella Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.



**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well**

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA PINAL	BASIN PINAL	SUBBASIN 11	D(4-9)28CAB
RECEIVED DATE 4/7/2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 4/14/2017	REMEDIAL ACTION SITE —	55- 482756	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type	Location of Well					
CHECK ONE	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify):	TOWNSHIP (N/S) 4.0 S RANGE (E/W) 9.0 E SECTION 28 160 ACRE SW 1/4 40 ACRE NE 1/4 10 ACRE NW 1/4 COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001 COUNTY WHERE WELL IS LOCATED PINAL LATITUDE 33 ° 3 ' 5.80 "N LONGITUDE 111 ° 26 ' 2.72 "W Degrees Minutes Seconds Degrees Minutes Seconds METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
ORIGINAL WELL OWNER (IF KNOWN) Conoco	DRILL DATE (IF KNOWN) November 1974					
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy						

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631 FAX NUMBER	TELEPHONE NUMBER (520) 374-3984 FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
TELEPHONE NUMBER (480) 558-3500	TELEPHONE NUMBER (602) 760-2423
ROC LICENSE CATEGORY A-4	EMAIL ADDRESS MNicholls@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 356S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482756

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	45	6.5	0	45	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
45	473	5				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
476	2094	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								

Condition of casing: (good, fair, poor, unknown) UNKNOWN

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	45	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

03/01/2017

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	2094	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	141.8
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):

☐ Alternative 1 ☐ Variance Option *

☐ Alternative 2 ☒ Alternative 5:

☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance

☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482756

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER
DATE	DATE 4-6-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482756 WELL OWNER ID: 356S

AUTHORIZED DRILLER: NATIONAL EWP, INC.

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NW 1/4 of the NE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sela Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report



- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

RECEIVED

DEC 05 2017

ADWR

FILE NUMBER

D(4-9) 28 CAB

WELL REGISTRATION NUMBER

55 - 482756

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME	DWR LICENSE NUMBER
	NATIONAL EWP, INC.	823
	ADDRESS	TELEPHONE NUMBER
	1200 W. SAN PEDRO ST.	480-558-3500
	CITY / STATE / ZIP	FAX
	GILBERT, AZ 85233	

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER INC	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrologist
MAILING ADDRESS 1575 W HUNT HWY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE			LONGITUDE		
						3° 3' 3" N			111° 26' 27.2" W		
						Degrees			Minutes		
						Seconds			Seconds		
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL					
4S	9E	2 8	SW _{1/4}	NE _{1/4}	NW _{1/4}	1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER						METHOD OF LATITUDE / LONGITUDE (Check One)					
BOOK						<input type="checkbox"/> GPS: Hand-Held					
MAP						<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
PARCEL						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)					
1001						<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 356S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	X		* Blast and Perf 5-25 ft.
5. Was the well casing video logged?		X	
6. Why was the well abandoned?			
No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482756

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)															
Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	45	6.25	0	45	5.5	X				X					
45	473	5													
473	2094	2.97													

Condition of casing: ☐ Good ☐ Fair ☒ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	45			X								

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)																			
Refer to ADWR's Well Abandonment Handbook for additional information										DEPTH TO WATER n/a Feet Below Land Surface		DATE ABANDONMENT COMPLETED 7/7/17							
Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS					
0	5				X		5	52.5	X										
5	40					Blast & Perforate													

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				<input checked="" type="checkbox"/> Other (please specify) grout & blast Type V Cement	
CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)					

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE William Eddy	SIGNATURE OF QUALIFYING PARTY DATE 11-6-17



Arizona Department of Water Resources

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax

• www.azwater.gov •

Notice of Intention to Abandon a Well

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You **must** include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA <i>D-</i>	BASIN <i>PIN</i>	SUBBASIN <i>II</i>	<i>D(4-9)28 CAC</i>
RECEIVED DATE <i>9-22-2017</i>	WATERSHED <i>08</i>	WELL REGISTRATION NUMBER	
ISSUED DATE	REMEDIAL ACTION SITE <i>000</i>	<i>55- 482791</i>	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://qisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type	Location of Well																		
CHECK ONE	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS																		
<input type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):	<table border="1"> <tr> <th>TOWNSHIP (N/S)</th> <th>RANGE (E/W)</th> <th>SECTION</th> <th>160 ACRE</th> <th>40 ACRE</th> <th>10 ACRE</th> </tr> <tr> <td><i>4.0 S</i></td> <td><i>9.0 E</i></td> <td><i>28</i></td> <td><i>SW 1/4</i></td> <td><i>NE 1/4</i></td> <td><i>SW 1/4</i></td> </tr> </table>	TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	<i>4.0 S</i>	<i>9.0 E</i>	<i>28</i>	<i>SW 1/4</i>	<i>NE 1/4</i>	<i>SW 1/4</i>						
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE														
<i>4.0 S</i>	<i>9.0 E</i>	<i>28</i>	<i>SW 1/4</i>	<i>NE 1/4</i>	<i>SW 1/4</i>														
ORIGINAL WELL OWNER (IF KNOWN) <i>Conoco</i>	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL <i>1001</i>																		
ORIGINAL WELL DRILLING FIRM (IF KNOWN) <i>Joy</i>	COUNTY WHERE WELL IS LOCATED <i>PINAL</i>																		
	<table border="1"> <tr> <th colspan="3">LATITUDE</th> <th colspan="3">LONGITUDE</th> </tr> <tr> <td><i>33 °</i></td> <td><i>3 '</i></td> <td><i>3.66 "N</i></td> <td><i>111 °</i></td> <td><i>26 '</i></td> <td><i>4.20 "W</i></td> </tr> <tr> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> </tr> </table>	LATITUDE			LONGITUDE			<i>33 °</i>	<i>3 '</i>	<i>3.66 "N</i>	<i>111 °</i>	<i>26 '</i>	<i>4.20 "W</i>	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
LATITUDE			LONGITUDE																
<i>33 °</i>	<i>3 '</i>	<i>3.66 "N</i>	<i>111 °</i>	<i>26 '</i>	<i>4.20 "W</i>														
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds														
	METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held																		
	<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade																		
	*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)																		
	<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):																		

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>Arizona State Land Department (Mineral Lease #11-026500)</i>	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL <i>Florence Copper Inc.</i>
MAILING ADDRESS <i>1616 W. Adams Street</i>	MAILING ADDRESS <i>1575 W. Hunt Hwy</i>
CITY / STATE / ZIP CODE <i>Phoenix, AZ 85007</i>	CITY / STATE / ZIP CODE <i>Florence, Arizona 85123</i>
CONTACT PERSON NAME AND TITLE <i>Lisa Atkins (State Land Commissioner)</i>	CONTACT PERSON NAME AND TITLE <i>Ian Ream (Senior Hydrogeologist)</i>
TELEPHONE NUMBER FAX NUMBER <i>(602) 542-4631</i>	TELEPHONE NUMBER FAX NUMBER <i>(520) 374-3984 (520) 374-3999</i>

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME <i>National EWP, INC</i>	CONSULTING FIRM <i>Haley & Aldrich, Inc.</i>
DWR LICENSE NUMBER <i>823</i>	CONTACT PERSON NAME <i>Lauren Candreva</i>
ROC LICENSE CATEGORY <i>A-4</i>	TELEPHONE NUMBER <i>602-760-2429</i>
TELEPHONE NUMBER <i>(480) 558-3500</i>	EMAIL ADDRESS <i>lcandreva@haleyaldrich.com</i>
EMAIL ADDRESS <i>jstephens@nationalewp.com</i>	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) <i>357S</i>
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

VARIANCE GRANTED

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 -

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	45	6.5	0	45	5.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45	455	5				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
455	2280	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	45	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment					Sealing or Fill Material																
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	2280	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	149
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 -

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER Authorized under Mineral Lease # 11-026500	SIGNATURE OF WELL OWNER
DATE	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 357S

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482791

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SW ¼	NE ¼	SW ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° Degrees	3 ' Minutes	3.66 "N Seconds	LONGITUDE 111 ° Degrees	26 ' Minutes	4.20 "W Seconds
TELEPHONE NUMBER 520-374-3984		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade			COUNTY WHERE WELL IS LOCATED PINAL		
FAX 520-374-3999		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL					

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR TO** the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Ian Ream, Sr. Hydrogeologist

SIGNATURE OF WELL OWNER

[Signature] 1-2-2018 DATE



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CAC

WELL REGISTRATION NUMBER

55 - 482791

SECTION 1 - ABANDONMENT AUTHORIZATION		
Drilling Firm		
Mail To:	NAME	DWR LICENSE NUMBER
	LAYNE CHRISTENSEN COMPANY	7
	ADDRESS	TELEPHONE NUMBER
	12030 EAST RIGGS ROAD	480-895-8336
	CITY / STATE / ZIP	FAX
	CHANDLER, AZ 85249-3701	

SECTION 2 - WELL INFORMATION						
Well Owner Information						
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL				CONTACT PERSON NAME AND TITLE		
FLORENCE COPPER, INC				Ian Ream Senior Hydrogeologist		
MAILING ADDRESS				TELEPHONE NUMBER		
1675 W. HUNT HWY.				520-374-3984		
CITY / STATE / ZIP				FAX		
FLORENCE, AZ 85132				520-374-3999		
Location of Well						
WELL LOCATION ADDRESS (IF ANY)				LATITUDE		LONGITUDE
				33° 3' 3.66" N		111° 26' 4.20" W
				Degrees Minutes Seconds		Degrees Minutes Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL
4.0 S	9.0 E	28	SW 1/4	NE 1/4	SW 1/4	1470 Feet Above Sea Level
COUNTY ASSESSOR'S PARCEL ID NUMBER						METHOD OF LATITUDE / LONGITUDE (Check One)
BOOK MAP PARCEL						<input type="checkbox"/> GPS: Hand-Held
						<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade
						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)
						<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate
5. Was the well casing video logged?		X	
6. Why was the well abandoned?			
No longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482791

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	45	6.5	0	45	5.5	X										
45	455	5														
455	2280	2.97														


Condition of casing: ☐ Good ☒ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	45				X							

Refer to ADWR's Well Abandonment Handbook for additional information										DEPTH TO WATER N/A Feet Below Land Surface		DATE ABANDONMENT COMPLETED 1-22-2018						
Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SOWAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND	
0	5				X		5	2280	X								14.3	89.95
5	25					Blast Perf												

Actual Abandonment Method (See Well Abandonment Handbook)			Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2			CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and		
TYPE OR PRINT NAME AND TITLE Scott Graham	SIGNATURE OF QUALIFYING PARTY 	DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
REISSUE-VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482791** WELL OWNER ID: 357S

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: 7

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SW 1/4 of the **NE** 1/4 of the **SW** 1/4 Section **28** Township **4.0** **SOUTH** Range **9.0** **EAST**

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF **September 23, 2018**

Sella Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.



Arizona Department of Water Resources Groundwater Permitting and Wells Section P.O. Box 36020 Phoenix, Arizona 85067-6020 (602) 771-8527 • (602) 771-8690 fax • www.azwater.gov •	Notice of Intention to Abandon a Well	FEE \$150.00														
<ul style="list-style-type: none"> ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink. ❖ You <u>must</u> include with your Notice: <ul style="list-style-type: none"> ➢ Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6. ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">TO BE COMPLETED BY ADWR</th> <th style="text-align: center;">FILE NUMBER</th> </tr> <tr> <td style="width: 33%;">AREA/BASIN <i>PINAL</i></td> <td style="width: 33%;">BASIN <i>PIN</i></td> <td style="width: 33%;">SUBBASIN <i>11</i></td> <td rowspan="3" style="width: 33%; text-align: center; vertical-align: middle;"> <i>D(4-9)28CAC</i> 55-4182751 </td> </tr> <tr> <td>RECEIVED DATE <i>4/7/2017</i></td> <td colspan="2">WATERSHED <i>08</i></td> </tr> <tr> <td>ISSUED DATE <i>4/12/2017</i></td> <td colspan="2">REMEDIAL ACTION SITE</td> </tr> </table>		TO BE COMPLETED BY ADWR			FILE NUMBER	AREA/BASIN <i>PINAL</i>	BASIN <i>PIN</i>	SUBBASIN <i>11</i>	<i>D(4-9)28CAC</i> 55-4182751	RECEIVED DATE <i>4/7/2017</i>	WATERSHED <i>08</i>		ISSUED DATE <i>4/12/2017</i>	REMEDIAL ACTION SITE	
TO BE COMPLETED BY ADWR			FILE NUMBER													
AREA/BASIN <i>PINAL</i>	BASIN <i>PIN</i>	SUBBASIN <i>11</i>	<i>D(4-9)28CAC</i> 55-4182751													
RECEIVED DATE <i>4/7/2017</i>	WATERSHED <i>08</i>															
ISSUED DATE <i>4/12/2017</i>	REMEDIAL ACTION SITE															

SECTION 1. REGISTRY INFORMATION																																			
<i>To determine the location of well, please refer to the Well Registry Map (https://gisweb.azwater.gov/WellRegistry/Default.aspx) and Google Earth (http://www.earthpoint.us/Townships.aspx)</i>																																			
Well Type	Location of Well																																		
CHECK ONE <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal </div> <div> <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify): </div> </div> ORIGINAL WELL OWNER (IF KNOWN) Conoco	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>TOWNSHIP (N/S)</th> <th>RANGE (E/W)</th> <th>SECTION</th> <th>160 ACRE</th> <th>40 ACRE</th> <th>10 ACRE</th> </tr> <tr> <td>4.0 S</td> <td>9.0 E</td> <td>28</td> <td>SW 1/4</td> <td>NE 1/4</td> <td>SW 1/4</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>COUNTY ASSESSOR'S PARCEL ID NUMBER</th> <th>COUNTY WHERE WELL IS LOCATED</th> </tr> <tr> <td>BOOK MAP PARCEL 1001</td> <td>PINAL</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3">LATITUDE</th> <th colspan="3">LONGITUDE</th> </tr> <tr> <td>33 °</td> <td>3 ' 1.52 "N</td> <td></td> <td>111 °</td> <td>26 ' 2.74 "W</td> <td></td> </tr> <tr> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> </tr> </table> METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	4.0 S	9.0 E	28	SW 1/4	NE 1/4	SW 1/4	COUNTY ASSESSOR'S PARCEL ID NUMBER	COUNTY WHERE WELL IS LOCATED	BOOK MAP PARCEL 1001	PINAL	LATITUDE			LONGITUDE			33 °	3 ' 1.52 "N		111 °	26 ' 2.74 "W		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE																														
4.0 S	9.0 E	28	SW 1/4	NE 1/4	SW 1/4																														
COUNTY ASSESSOR'S PARCEL ID NUMBER	COUNTY WHERE WELL IS LOCATED																																		
BOOK MAP PARCEL 1001	PINAL																																		
LATITUDE			LONGITUDE																																
33 °	3 ' 1.52 "N		111 °	26 ' 2.74 "W																															
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds																														
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy	DRILL DATE (IF KNOWN) January 1974																																		

SECTION 2. OWNER INFORMATION	
Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER (602) 542-4631	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION	
Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
ROC LICENSE CATEGORY A-4	TELEPHONE NUMBER (602) 760-2423
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS MNicholls@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.			
Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 366S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482751

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	45	6.5	0	45	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
45	425	5				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	45	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

DATE ABANDONMENT IS TO BEGIN

03/01/2017

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	425	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	57.3
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):

☐ Alternative 1 ☐ Variance Option *

☐ Alternative 2 ☒ Alternative 5:

☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance

☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

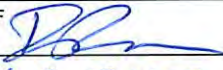
55 - 482751

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 4-6-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
VARIANCE GRANTED -**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482751** WELL OWNER ID: 366S

AUTHORIZED DRILLER: **NATIONAL EWP, INC.**

LICENSE NO: **823**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SW 1/4 of the NE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Munillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CAC

WELL REGISTRATION NUMBER

55 - 482751

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME NATIONAL EWP, INC.	DWR LICENSE NUMBER 823
	ADDRESS 1200 W. SAN PEDRO ST.	TELEPHONE NUMBER 480-558-3500
	CITY / STATE / ZIP GILBERT, AZ 85233	FAX

RECEIVED

FEB 6 - 2018

**ARIZONA DEPARTMENT
OF WATER RESOURCES**

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER INC	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrologist
MAILING ADDRESS 1575 W HUNT HWY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE 3 3 ° 3 ' 1.52 " N Degrees Minutes Seconds			LONGITUDE 111 ° 26 ' 2.74 " W Degrees Minutes Seconds		
TOWNSHIP (N/S) 4S	RANGE (E/W) 9E	SECTION 28	160 ACRE SW 1/4	40 ACRE N E 1/4	10 ACRE SW 1/4	LAND SURFACE ELEVATION AT WELL 1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade *If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 366S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate 5'-25'
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482751

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)															
Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	425	5	0	425	3.5	X				X					

Condition of casing: ☐ Good ☐ Fair ☒ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	425	X										

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)		
Refer to ADWR's Well Abandonment Handbook for additional information	DEPTH TO WATER 230 Feet Below Land Surface	DATE ABANDONMENT COMPLETED 7.21.17

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND	
0	425					blast	0	426	X								15.2	24.8

Actual Abandonment Method (See Well Abandonment Handbook)			Emplacement Method of Sealing or Fill Material	
CHECK ONE	<input type="checkbox"/> Alternative 4	<input checked="" type="checkbox"/> Other (please specify)	CHECK ONE	
<input type="checkbox"/> Standard Method	<input type="checkbox"/> Variance Option		<input type="checkbox"/> Gravity	
<input type="checkbox"/> Alternative 1	<input type="checkbox"/> Alternative 5	grout & blast	<input type="checkbox"/> Pressure Grouting	
<input type="checkbox"/> Alternative 2	<input type="checkbox"/> Variance Option 1	Type V Cement	<input checked="" type="checkbox"/> Tremie Pumped	
<input type="checkbox"/> Alternative 3	<input type="checkbox"/> Variance Option 2		<input type="checkbox"/> Other (please specify)	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <i>William Edley</i>	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i> DATE 2-1-18



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

Notice of Intention to Abandon a Well

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA D -	BASIN PIN	SUBBASIN 11	D(4-9)28CAC
RECEIVED DATE 9-22-2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 10-11-2017	REMEDIAL ACTION SITE 000	55- 482788	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well	
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS	
<input type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer		
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical		
<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Mineral Exploration		
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):		
ORIGINAL WELL OWNER (IF KNOWN) Conoco		TOWNSHIP (N/S) 4.0 S	
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		RANGE (E/W) 9.0 E	
		SECTION 28	
		160 ACRE SW 1/4	
		40 ACRE NE 1/4	
		10 ACRE SW 1/4	
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001-	
		COUNTY WHERE WELL IS LOCATED PINAL	
		LATITUDE 33 ° 3 ' 3.64 "N	
		LONGITUDE 111 ° 25 ' 58.33" W	
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held	
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade	
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)	
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME National EWP, INC		CONSULTING FIRM Haley & Aldrich, Inc.	
DWR LICENSE NUMBER 823	ROC LICENSE CATEGORY A-4	CONTACT PERSON NAME Lauren Candreva	
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS jstephens@nationalewp.com	TELEPHONE NUMBER 602-760-2429	EMAIL ADDRESS lcandreva@haleyaldrich.com

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 414S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482788

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	50	6.5	0	50	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
50	380	5	0	380	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
380	2267	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	380	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	GROUT	CHIPS			PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	2267	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	109.19
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 - 402788

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER Authorized under Mineral Lease # 11-026500	SIGNATURE OF WELL OWNER 
DATE	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ You **must** include with your Notice:
 - check or money order for any required fee(s)
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

**** PLEASE PRINT CLEARLY ****

Well ID: 414S

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482788

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SW ¼	NE ¼	SW ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° Degrees	3 ' Minutes	3.64 "N Seconds	LONGITUDE 111 ° Degrees	25 ' Minutes	58.33 "W Seconds
TELEPHONE NUMBER 520-374-3984		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade				*GPS: Hand-Held	
FAX 520-374-3999		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):				COUNTY WHERE WELL IS LOCATED PINAL	
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL					

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR TO** the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Ian Ream, Sr. Hydrogeologist

SIGNATURE OF WELL OWNER

[Signature] 1-2-2018

DATE



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report withing 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CAC

WELL REGISTRATION NUMBER

55 - 482788

SECTION 1: ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME	DWR LICENSE NUMBER
	LAYNE CHRISTENSEN COMPANY	7
	ADDRESS	TELEPHONE NUMBER
	12030 EAST RIGGS ROAD	480-895-9336
	CITY / STATE / ZIP	FAX
	CHANDLER, AZ 85249-3701	

SECTION 2: WELL IDENTIFICATION

Well Owner Information													
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC							CONTACT PERSON NAME AND TITLE Ian Ream Sr. Geologist						
MAILING ADDRESS 1575 W. HUNT HWY.							TELEPHONE NUMBER 520-37-3984						
CITY / STATE / ZIP FLORENCE, AZ 85132							FAX 520-374-3999						
Location of Well													
WELL LOCATION ADDRESS (IF ANY)							LATITUDE						
							33° 3' 3.64" N Degrees Minutes Seconds						
							LONGITUDE						
							111° 25' 58.33" W Degrees Minutes Seconds						
TOWNSHIP (N/S)							LAND SURFACE ELEVATION AT WELL						
4.0 S							Feet Above Sea Level						
RANGE (E/W)													
9.0 E													
SECTION													
28													
160 ACRE													
40 ACRE													
10 ACRE													
SW 1/4													
NE 1/4													
SW 1/4													
COUNTY ASSESSOR'S PARCEL ID NUMBER							METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held						
BOOK							<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade						
MAP							*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)						
PARCEL							<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):						

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 414S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate 5'-25'
5. Was the well casing video logged?		X	
6. Why was the well abandoned? This well is no longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482788

SECTION 4 - Existing Borehole & Existing Casing (to the best of your knowledge)																
Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE			DEPTH FROM SURFACE			MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)	BOREHOLE DIAMETER (Inches)	FROM (feet)	TO (feet)	OUTER DIAMETER (Inches)	STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	50	6.5	0	50	5.6	X										
50	380	5	0	380	3	X										
380	2267	2.97														

Condition of casing: ☐ Good ☒ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
					GROUT	CHIPS	PELLETS					
0	380				X							

Refer to ADWR's Well Abandonment Handbook for additional information	DEPTH TO WATER Feet Below Land Surface	DATE ABANDONMENT COMPLETED 2-15-2018
--	---	---

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE (T)				DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)					
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT			HIGH SOLIDS				
															GROUT	CHIPS	PELLETS	SAND		
0	5				X		5	2267											1:1	109.19
5	25					Blast Perf														

Actual Abandonment Method (See Well Abandonment Handbook)			Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3			CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	
<input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2			Blast & Perforate 5' to 25' Type V Cement	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <i>Scott Graham</i>	SIGNATURE OF QUALIFYING PARTY <i>Scott Graham</i> DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482788** WELL OWNER ID: 414S

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SW 1/4 of the NE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF **September 23, 2018**

Sally Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.



**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well****FEE
\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA <i>PINAL</i>	BASIN <i>PIN</i>	SUBBASIN <i>11</i>	<i>D(4-9)28CAB</i>
RECEIVED DATE <i>4/7/2017</i>	WATERSHED <i>08</i>	WELL REGISTRATION NUMBER	
ISSUED DATE	REMEDIAL ACTION SITE	<i>55- 482752</i>	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well	
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS	
<input type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer	<div style="text-align: center;">RECEIVED <i>APR 7 2017</i> ARIZONA DEPARTMENT OF WATER RESOURCES</div>	
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical		
<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Mineral Exploration		
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):		
ORIGINAL WELL OWNER (IF KNOWN) Conoco		TOWNSHIP (N/S) 4.0 S	
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		RANGE (E/W) 9.0 E	
		SECTION 28	
		160 ACRE SW 1/4	
		40 ACRE NE 1/4	
		10 ACRE NW 1/4	
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL	
		1001	
		COUNTY WHERE WELL IS LOCATED PINAL	
		LATITUDE 33 ° 3 ' 5.79 "N	
		LONGITUDE 111 ° 25 ' 59.78 "W	
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held	
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade	
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)	
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
TELEPHONE NUMBER (480) 558-3500	TELEPHONE NUMBER (602) 760-2423
ROC LICENSE CATEGORY A-4	EMAIL ADDRESS MNicholls@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 415S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482752

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.5	0	40	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	280	5	0	280	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
280	2042	2.97				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	280	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	2042	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	98.2
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Perf.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE
☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4:
☐ Variance Option *
☒ Alternative 5:
☐ Variance Option 1*
☐ Variance Option 2*
☐ Other (please specify):
 * requires a letter requesting a variance

Emplacement Method of Sealing or Fill Material

CHECK ONE
☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.	
Land Owner PRINT NAME SIGNATURE OF LAND OWNER DATE	
Well Owner PRINT NAME SIGNATURE OF WELL OWNER DATE	
By checking this box, you agree to allow ADWR to contact you via electronic mail. <input checked="" type="checkbox"/>	
By checking this box, you agree to allow ADWR to contact you via electronic mail. <input type="checkbox"/>	
EMAIL ADDRESS ADDRESS	

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 7. Well Abandonment Diagram

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482752

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482752** WELL OWNER ID: 415S

AUTHORIZED DRILLER: **NATIONAL EWP, INC.**

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NW 1/4 of the NE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Murillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CAB

WELL REGISTRATION NUMBER

55 - 482752

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME	DWR LICENSE NUMBER
	NATIONAL EWP, INC.	823
	ADDRESS	TELEPHONE NUMBER
	1200 W. SAN PEDRO ST.	480-558-3500
	CITY / STATE / ZIP	FAX
	GILBERT, AZ 85233	

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	CONTACT PERSON NAME AND TITLE
FLORENCE COPPER INC	Ian Ream Sr. Hydrologist
MAILING ADDRESS	TELEPHONE NUMBER
1575 W HUNT HWY	520-374-3984
CITY / STATE / ZIP	FAX
FLORENCE, AZ 85132	520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE			LONGITUDE		
						33°	3'	5.79"N	111°	25'	59.78"W
						Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL					
4S	9E	28	SW 1/4	NE 1/4	NW 1/4	1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> *GPS: Hand-Held					
BOOK MAP PARCEL						<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
1001						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)					
						<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 415S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?		X	* Blast and Perf 5-25 ft.
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482752**SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN** (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	40	6.5	0	40	5.6	X				X						
40	280	5	0	280	3	X				X						
280	2042	2.97														

Condition of casing: ☐ Good ☐ Fair ☒ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	280			X								

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER
230

Feet Below Land Surface

DATE ABANDONMENT COMPLETED
7/7/17

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)								MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS	SAND			
0	5				X		5	394	X								15.2	46
5	250					Blast & Perforate												

Actual Abandonment Method (See Well Abandonment Handbook)

CHECK ONE
☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4
☐ Variance Option
☐ Alternative 5
☐ Variance Option 1
☐ Variance Option 2
☒ Other (please specify)
grout & blast
 Type V Grout

Emplacement Method of Sealing or Fill Material

CHECK ONE
☐ Gravity
☐ Pressure Grouting
☒ Tremie Pumped
☐ Other (please specify)

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

SIGNATURE OF QUALIFYING PARTY

DATE

William Eddy

11-6-17

Arizona Department of Water Resources Groundwater Permitting and Wells Section P.O. Box 36020 Phoenix, Arizona 85067-6020 (602) 771-8527 • (602) 771-8690 fax • www.azwater.gov •	Notice of Intention to Abandon a Well	FEE \$150.00																
<ul style="list-style-type: none"> ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink. ❖ You <u>must</u> include with your Notice: <ul style="list-style-type: none"> ➢ Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6. ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">TO BE COMPLETED BY ADWR</th> <th style="text-align: center;">FILE NUMBER</th> </tr> <tr> <td style="width: 33%;">AMA/INA <i>PINAL</i></td> <td style="width: 33%;">BASIN <i>P.N.</i></td> <td style="width: 33%;">SUBBASIN <i>11</i></td> <td rowspan="3" style="width: 33%; text-align: center; vertical-align: middle; font-size: 1.2em;"> <i>D4-9)28 CBA</i> </td> </tr> <tr> <td>RECEIVED DATE <i>4/7/2017</i></td> <td colspan="2">WATERSHED <i>DS</i></td> <td style="text-align: center;">WELL REGISTRATION NUMBER</td> </tr> <tr> <td>ISSUED DATE <i>4/21/2017</i></td> <td colspan="2">REMEDIAL ACTION SITE <i>—</i></td> <td style="text-align: center;">55- <i>482753</i></td> </tr> </table>		TO BE COMPLETED BY ADWR			FILE NUMBER	AMA/INA <i>PINAL</i>	BASIN <i>P.N.</i>	SUBBASIN <i>11</i>	<i>D4-9)28 CBA</i>	RECEIVED DATE <i>4/7/2017</i>	WATERSHED <i>DS</i>		WELL REGISTRATION NUMBER	ISSUED DATE <i>4/21/2017</i>	REMEDIAL ACTION SITE <i>—</i>		55- <i>482753</i>
TO BE COMPLETED BY ADWR			FILE NUMBER															
AMA/INA <i>PINAL</i>	BASIN <i>P.N.</i>	SUBBASIN <i>11</i>	<i>D4-9)28 CBA</i>															
RECEIVED DATE <i>4/7/2017</i>	WATERSHED <i>DS</i>			WELL REGISTRATION NUMBER														
ISSUED DATE <i>4/21/2017</i>	REMEDIAL ACTION SITE <i>—</i>			55- <i>482753</i>														

SECTION 1. REGISTRY INFORMATION																							
To determine the location of well, please refer to the Well Registry Map (https://gisweb.azwater.gov/WellRegistry/Default.aspx) and Google Earth (http://www.earthpoint.us/Townships.aspx)																							
Well Type	Location of Well																						
CHECK ONE <input type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify) _____	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 16.6%;">TOWNSHIP (N/S)</th> <th style="width: 16.6%;">RANGE (E/W)</th> <th style="width: 16.6%;">SECTION</th> <th style="width: 16.6%;">160 ACRE</th> <th style="width: 16.6%;">40 ACRE</th> <th style="width: 16.6%;">10 ACRE</th> </tr> <tr> <td style="text-align: center;">4.0 S</td> <td style="text-align: center;">9.0 E</td> <td style="text-align: center;">28</td> <td style="text-align: center;">SW ¼</td> <td style="text-align: center;">NW ¼</td> <td style="text-align: center;">NE ¼</td> </tr> </table>					TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	4.0 S	9.0 E	28	SW ¼	NW ¼	NE ¼						
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE																		
4.0 S	9.0 E	28	SW ¼	NW ¼	NE ¼																		
ORIGINAL WELL OWNER (IF KNOWN) Conoco	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK _____ MAP _____ PARCEL 1001																						
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy	DRILL DATE (IF KNOWN) October 1974																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">LATITUDE</th> <th colspan="3" style="text-align: center;">LONGITUDE</th> </tr> <tr> <td style="width: 16.6%;">33 °</td> <td style="width: 16.6%;">3 '</td> <td style="width: 16.6%;">5.80 "N</td> <td style="width: 16.6%;">111 °</td> <td style="width: 16.6%;">26 '</td> <td style="width: 16.6%;">6.11 "W</td> </tr> <tr> <td style="text-align: center;">Degrees</td> <td style="text-align: center;">Minutes</td> <td style="text-align: center;">Seconds</td> <td style="text-align: center;">Degrees</td> <td style="text-align: center;">Minutes</td> <td style="text-align: center;">Seconds</td> </tr> </table>						LATITUDE			LONGITUDE			33 °	3 '	5.80 "N	111 °	26 '	6.11 "W	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
LATITUDE			LONGITUDE																				
33 °	3 '	5.80 "N	111 °	26 '	6.11 "W																		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds																		
METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify): _____																							

SECTION 2. OWNER INFORMATION			
Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>		
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.		
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy		
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123		
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)		
TELEPHONE NUMBER FAX NUMBER (602) 542-4631	TELEPHONE NUMBER FAX NUMBER (520) 374-3984 (520) 374-3999		

SECTION 3. ABANDONMENT AUTHORIZATION			
Drilling Firm	Consultant (if applicable)		
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.		
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls		
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS jstephens@nationalewp.com	TELEPHONE NUMBER (602) 760-2423	EMAIL ADDRESS MNicholls@haleyaldrich.com

SECTION 4.			
Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 447S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482753

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.5	0	40	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	593	5	0	593	4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE					DEPTH FROM SURFACE		MATERIAL TYPE							MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	593	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	51.3
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

CHECK ONE
☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4:
☐ Variance Option *
☒ Alternative 5:
☐ Variance Option 1*
☐ Variance Option 2*
 * requires a letter requesting a variance

CHECK ONE
☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482753

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 4-6-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482753

AUTHORIZED DRILLER: NATIONAL EWP, INC.

447S

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the NW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Murillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CBA

WELL REGISTRATION NUMBER

55 - 482753

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME	DWR LICENSE NUMBER
	NATIONAL EWP, INC.	823
	ADDRESS	TELEPHONE NUMBER
	1200 W. SAN PEDRO ST.	480-558-3500
	CITY / STATE / ZIP	FAX
	GILBERT, AZ 85233	

RECEIVED

FEB 6 - 2018

**ARIZONA DEPARTMENT
OF WATER RESOURCES**

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	CONTACT PERSON NAME AND TITLE
FLORENCE COPPER INC	Ian Ream Sr. Hydrologist
MAILING ADDRESS	TELEPHONE NUMBER
1575 W HUNT HWY	520-374-3984
CITY / STATE / ZIP	FAX
FLORENCE, AZ 85132	520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE			LONGITUDE		
						33 °	3	580 " N	111 °	26	6.11 W
						Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL					
4S	9E	28	S W 1/4	N W 1/4	NE 1/4	1475 Feet Above Sea Level					
						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held					
						<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
COUNTY ASSESSOR'S PARCEL ID NUMBER						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)					
BOOK						<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
MAP											
PARCEL											

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 447S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Cut off and buried 5' below grade 5' - 593' blast and perf
5. Was the well casing video logged?		X	
6. Why was the well abandoned?			
No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482753

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)																
Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	40	6.5	0	40	5.6	X										
40	592	5														

Condition of casing: ☐ Good ☐ Fair ☒ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	40	X										

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)		
Refer to ADWR's Well Abandonment Handbook for additional information	DEPTH TO WATER N/A Feet Below Land Surface	DATE ABANDONMENT COMPLETED 8.8.17

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT Type V	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND		
0	593					Blast	5	592	X									15.2	41

Actual Abandonment Method (See Well Abandonment Handbook)			Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2			CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	
<input checked="" type="checkbox"/> Other (please specify) Grout and Blast Type V Cement				

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <i>William Sdd</i>	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i> DATE <i>2-1-18</i>

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well**
FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
ASAP/INA PINAL	BASIN PINAL	SUBBASIN 11	D(4-9)28CBA
RECEIVED DATE 4/7/2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE	REMEDIAL ACTION SITE	55-482754	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type	Location of Well					
CHECK ONE	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal	<input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify):					
ORIGINAL WELL OWNER (IF KNOWN) Conoco	TOWNSHIP (N/S) 4.0 S					
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy	RANGE (E/W) 9.0 E					
	SECTION 28					
	160 ACRE SW 1/4					
	40 ACRE NW 1/4					
	10 ACRE NE 1/4					
	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL			COUNTY WHERE WELL IS LOCATED		
	1001			PINAL		
	LATITUDE 33 ° 3 ' 5.77 "N			LONGITUDE 111 ° 26 ' 8.54 "W		
	Degrees Minutes Seconds			Degrees Minutes Seconds		
	METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held					
	<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
	*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)					
	<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
ROC LICENSE CATEGORY A-4	TELEPHONE NUMBER (602) 760-2423
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS MNicholls@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 448S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482754

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.5	0	40	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	750	5	0	750	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	750	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	750	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	36.57
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 - 482754

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 4-6-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482754

4485

AUTHORIZED DRILLER: NATIONAL EWP, INC.

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the NW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Murillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CBA

WELL REGISTRATION NUMBER

55 - 482754

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME	DWR LICENSE NUMBER
	NATIONAL EWP, INC.	823
	ADDRESS	TELEPHONE NUMBER
	1200 W. SAN PEDRO ST.	480-558-3500
	CITY / STATE / ZIP	FAX
	GILBERT, AZ 85233	

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER INC	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrologist
MAILING ADDRESS 1575 W HUNT HWY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE 33 ° 3 ' 5.77 " N Degrees Minutes Seconds			LONGITUDE 111 ° 26 ' 8.54 " W Degrees Minutes Seconds		
TOWNSHIP (N/S) 4S	RANGE (E/W) 9E	SECTION 28	160 ACRE SW 1/4	40 ACRE N W 1/4	10 ACRE NE 1/4	LAND SURFACE ELEVATION AT WELL 1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 448S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	X		* Blast and Perf 5-25 ft.
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482754

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)															
Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.5	0	40	5.6	X				X					
40	750	5	40	750	3	X				X					

Condition of casing: ☐ Good ☐ Fair ☒ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	750			X								

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER

230

Feet Below Land Surface

DATE ABANDONMENT COMPLETED

7.21.17

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)								MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS				
0	5				X		5	721	X								15.2	36.8
5	721					Blast & Perforate												

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3				<input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2	
<input checked="" type="checkbox"/> Other (please specify) grout & blast Type V Grout				CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <i>William Eddy</i>	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i> 11-6-17 DATE

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well**
FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA <i>PINAL</i>	BASIN <i>PIN</i>	SUBBASIN <i>11</i>	<i>D(4-9)28C6D</i>
RECEIVED DATE <i>4/7/2017</i>	WATERSHED <i>08</i>	WELL REGISTRATION NUMBER	
ISSUED DATE <i>4/21/2017</i>	REMEDIAL ACTION SITE	<i>55- 482755</i>	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type	Location of Well	
CHECK ONE	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS	
<input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify):	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE <i>4.0 S 9.0 E 28 SW 1/4 NW 1/4 SE 1/4</i>	
ORIGINAL WELL OWNER (IF KNOWN) Conoco	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001	COUNTY WHERE WELL IS LOCATED PINAL
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy	DRILL DATE (IF KNOWN) October 1974	LATITUDE LONGITUDE 33 ° 3 ' 3.64 "N 111 ° 26 ' 10.02 "W Degrees Minutes Seconds Degrees Minutes Seconds METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER FAX NUMBER (602) 542-4631	TELEPHONE NUMBER FAX NUMBER (520) 374-3984 (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
TELEPHONE NUMBER (480) 558-3500	TELEPHONE NUMBER (602) 760-2423
ROC LICENSE CATEGORY A-4	EMAIL ADDRESS MNicholls@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 453S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482755

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.5	0	40	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
0	870	5	0	870	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	870	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

DATE ABANDONMENT IS TO BEGIN

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	870	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	42.46
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):

☐ Alternative 1 ☐ Variance Option *

☐ Alternative 2 ☒ Alternative 5:

☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance

☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER


55 - 482755

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 4-6-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482755

4535

AUTHORIZED DRILLER: NATIONAL EWP, INC.

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SE 1/4 of the NW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CBD

WELL REGISTRATION NUMBER

55 - 482755

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME	DWR LICENSE NUMBER
	NATIONAL EWP, INC.	823
	ADDRESS	TELEPHONE NUMBER
	1200 W. SAN PEDRO ST.	480-558-3500
	CITY / STATE / ZIP	FAX
	GILBERT, AZ 85233	

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	CONTACT PERSON NAME AND TITLE
FLORENCE COPPER INC	Ian Ream Sr. Hydrologist
MAILING ADDRESS	TELEPHONE NUMBER
1575 W HUNT HWY	520-374-3984
CITY / STATE / ZIP	FAX
FLORENCE, AZ 85132	520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE			LONGITUDE		
						33°	3'	3.64" N	111°	26'	10.02" W
						Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL					
4S	9E	28	S W 1/4	N W 1/4	SE 1/4	1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held					
BOOK						<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
MAP						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)					
PARCEL						<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
1001											

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 453S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	X		* Blast and Perf 5-25 ft.
5. Was the well casing video logged?		X	
6. Why was the well abandoned?			
No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482755**SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN** (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	40	6.5	0	40	5.6	X				X						
40	870	5	0	870	3	X				X						

Condition of casing: ☐ Good ☐ Fair ☒ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	870			X								

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER
230

Feet Below Land Surface

DATE ABANDONMENT COMPLETED
7.21.17

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)							MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS				SAND	
0	5				X		5	820	X									15.2	65.8
5	820					Blast & Perforate													

Actual Abandonment Method (See Well Abandonment Handbook)**Emplacement Method of Sealing or Fill Material**

CHECK ONE

☐ Standard Method☐ Alternative 4☐ Variance Option☐ Alternative 1☐ Alternative 5☐ Alternative 2☐ Variance Option 1☐ Alternative 3☐ Variance Option 2☒ Other (please specify)

grout & blast

Type V Cement

CHECK ONE

☐ Gravity☐ Pressure Grouting☒ Tremie Pumped☐ Other (please specify)

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

SIGNATURE OF QUALIFYING PARTY

DATE

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well**

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR		FILE NUMBER
AMOUNT PIN	BASIN PIN 11	D(4-9)28C8D
RECEIVED DATE 2/28/17	WATERSHED 08	WELL REGISTRATION NUMBER
ISSUED DATE 3/2/17	REMEDIAL ACTION SITE -	55-538308

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well	
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS	
<input type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):		TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 4.0 S 9.0 E 28 SW 1/4 NW 1/4 SE 1/4	
ORIGINAL WELL OWNER (IF KNOWN) Conoco		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL COUNTY WHERE WELL IS LOCATED 1001 PINAL	
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		LATITUDE LONGITUDE 33 ° 3 ' 1.54 "N 111 ° 26 ' 6.11 "W Degrees Minutes Seconds Degrees Minutes Seconds	
DRILL DATE (IF KNOWN) October 1974		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	

SECTION 2. OWNER INFORMATION

Land Owner		Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.	
MAILING ADDRESS 1616 W. Adams Street		MAILING ADDRESS 1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE Phoenix, AZ 85007		CITY / STATE / ZIP CODE Florence, Arizona 85132	
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)		CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER FAX NUMBER (602) 542-4631		TELEPHONE NUMBER FAX NUMBER (520) 374-3984 (520) 374-3999	

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME National EWP, INC		CONSULTING FIRM Haley & Aldrich, Inc.	
DWR LICENSE NUMBER 823	ROC LICENSE CATEGORY A-4	CONTACT PERSON NAME Mark Nicholls	
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS jstephens@nationalewp.com	TELEPHONE NUMBER (602) 760-2423	EMAIL ADDRESS MNicholls@haleyaldrich.com

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 454S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No Longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 538308

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.5	0	40	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
0	403	5	0	403	4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			SAND	GRAVEL	SIZE
					GROUT	CHIPS	PELLETS	IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE			
0	403	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE				IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE							MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	GROUT	CHIPS			PELLETS	SAND
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	403	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	34.7
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):

☐ Alternative 1 ☐ Variance Option *

☐ Alternative 2 ☒ Alternative 5:

☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance

☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

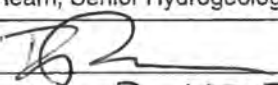
55 - 538308

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 2-15-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-538308

AUTHORIZED DRILLER: **NATIONAL EWP, INC.**

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON ENV - MONITOR WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the **SE** 1/4 of the **SW** 1/4 Section **28** Township **4.0** **SOUTH** Range **9.0** **EAST**

NO. OF WELLS IN THIS PROJECT:

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF



GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 GDA

WELL REGISTRATION NUMBER

55 - 538308

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME	DWR LICENSE NUMBER
	NATIONAL EWP, INC.	823
	ADDRESS	TELEPHONE NUMBER
	1200 W. SAN PEDRO ST.	480-558-3500
	CITY / STATE / ZIP	FAX
	GILBERT, AZ 85233	

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC.	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrologist
MAILING ADDRESS 1575 W. HUNT HIGHWAY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE			LONGITUDE		
						33°	3'	1.54"N	111°	26'	6.11"W
						Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL					
4S	9E	28	SW _{1/4}	N W _{1/4}	SE 1/4	1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER						METHOD OF LATITUDE / LONGITUDE (Check One)					
BOOK						<input type="checkbox"/> GPS: Hand-Held					
MAP						<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
PARCEL						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)					
1001						<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 454-S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	X		* Blast and Perf 5-25 ft.
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 538308**SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN** (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	40	6.5	0	40	5.6	X				X						
40	403	5	0	403	4	X				X						

Condition of casing: ☐ Good ☐ Fair ☒ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	403			X								

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER
230

Feet Below Land Surface

DATE ABANDONMENT COMPLETED
7.21.17

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)								MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS					SAND
0	5				X		5	380	X									15.2	58
5	380					Blast & Perforate													

Actual Abandonment Method (See Well Abandonment Handbook)

CHECK ONE
☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4
☐ Variance Option
☐ Alternative 5
☐ Variance Option 1
☐ Variance Option 2
☒ Other (please specify)
 grout & blast
 Type V Grout

Emplacement Method of Sealing or Fill Material

CHECK ONE
☐ Gravity
☐ Pressure Grouting
☒ Tremie Pumped
☐ Other (please specify)

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

William Eddy

SIGNATURE OF QUALIFYING PARTY

[Signature]

DATE

11-6-17

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well**
FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA PINAL	BASIN P2N	SUBBASIN 11	D(4-9)28CBD
RECEIVED DATE 4/7/2017	WATERSHED 08		WELL REGISTRATION NUMBER
ISSUED DATE 4/21/2017	REMEDIAL ACTION SITE		55-482750

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type	Location of Well												
CHECK ONE	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS												
<input type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input checked="" type="checkbox"/> Mineral Exploration APR 7 2017 <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):	<table border="1"> <tr> <th>TOWNSHIP (N/S)</th> <th>RANGE (E/W)</th> <th>SECTION</th> <th>160 ACRE</th> <th>40 ACRE</th> <th>10 ACRE</th> </tr> <tr> <td>4.0 S</td> <td>9.0 E</td> <td>28</td> <td>SW ¼</td> <td>NW ¼</td> <td>SE ¼</td> </tr> </table>	TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	4.0 S	9.0 E	28	SW ¼	NW ¼	SE ¼
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE								
4.0 S	9.0 E	28	SW ¼	NW ¼	SE ¼								
ORIGINAL WELL OWNER (IF KNOWN) Conoco	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001												
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy	COUNTY WHERE WELL IS LOCATED PINAL												
DRILL DATE (IF KNOWN) October 1974	LATITUDE: 33 ° 3 ' 1.49 "N LONGITUDE: 111 ° 26 ' 8.56 "W Degrees Minutes Seconds Degrees Minutes Seconds												
METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held													
<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade													
*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)													
<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):													

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER FAX NUMBER (602) 542-4631	TELEPHONE NUMBER FAX NUMBER (520) 374-3984 (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
TELEPHONE NUMBER (480) 558-3500	TELEPHONE NUMBER (602) 760-2423
ROC LICENSE CATEGORY A-4	EMAIL ADDRESS MNicholls@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 455S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482750

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	7.875	0	40	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	553	5	0	553	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	553	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	553	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	26.9
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE
☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4:
☐ Variance Option *
☒ Alternative 5:
☐ Variance Option 1*
☐ Variance Option 2*
 * requires a letter requesting a variance

Emplacement Method of Sealing or Fill Material

CHECK ONE
☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER


55 - 482750

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 4-6-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482750

4555

AUTHORIZED DRILLER: NATIONAL EWP, INC.

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SE 1/4 of the NW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

NP

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CBD

WELL REGISTRATION NUMBER

55 - 482750

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:

NAME
NATIONAL EWP, INC.
ADDRESS
1200 W. SAN PEDRO ST.
CITY / STATE / ZIP
GILBERT, AZ 85233

DWR LICENSE NUMBER
823

TELEPHONE NUMBER
480-558-3500

FAX

RECEIVED

FEB 6 - 2018

**ARIZONA DEPARTMENT
OF WATER RESOURCES**

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL
FLORENCE COPPER INC

MAILING ADDRESS
1575 W HUNT HWY

CITY / STATE / ZIP
FLORENCE, AZ 85132

CONTACT PERSON NAME AND TITLE
Ian Ream Sr. Hydrologist

TELEPHONE NUMBER
520-374-3984

FAX
520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)

LATITUDE

33 ° 3 ' 1.49 " N
Degrees Minutes Seconds

LONGITUDE

111 ° 26 ' 8.56" W
Degrees Minutes Seconds

TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE
4S 9E 2 8 S W 1/4 N W 1/4 SE 1/4

LAND SURFACE ELEVATION AT WELL

Feet Above Sea Level

COUNTY ASSESSOR'S PARCEL ID NUMBER
BOOK MAP PARCEL

1001

METHOD OF LATITUDE / LONGITUDE (Check One) ☐ GPS: Hand-Held
☐ USGS Quad Map ☒ Conventional Survey ☐ GPS: Survey-Grade

*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)
☐ NAD-83 ☐ Other (please specify):

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 455S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	X		* Blast and Perf 5-25 ft.
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482750

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)																
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)			
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE				
0	553	5	0	553	3.5	u	n	k	n	o	w	n	X						

Condition of casing: ☐ Good ☐ Fair ☒ Poor

Existing Annular Material (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	553	X										

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER

230

Feet Below Land Surface

DATE ABANDONMENT COMPLETED

7.21.17

Casing Treatment

DEPTH FROM SURFACE		TREATMENT TYPE (T)					IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		
0	553					Blast Perforated	

Sealing or Fill Material

DEPTH FROM SURFACE		MATERIAL TYPE (T)										MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)
FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND			
		Type V					GROUT	CHIPS	PELLETS				
0	553	X									15.2	51.8	

Actual Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method☐ Alternative 1☐ Alternative 2☐ Alternative 3☐ Alternative 4☐ Variance Option☐ Alternative 5☐ Variance Option 1☐ Variance Option 2☒ Other (please specify)

grout & blast

Type V Cement

Emplacement Method of Sealing or Fill Material

CHECK ONE

☐ Gravity☐ Pressure Grouting☒ Tremie Pumped☐ Other (please specify)

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

William Eder

SIGNATURE OF QUALIFYING PARTY

[Signature]

DATE

2-1-18

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well****FEE
\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMAINA PINAL	BASIN PIN	SUBBASIN 11	D/4-9/28 CBD
RECEIVED DATE 4/7/2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 4/21/2017	REMEDIAL ACTION SITE —	55-482749	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well	
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS	
<input type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer	<div style="text-align: center;">RECEIVED APR 7 2017 ARIZONA DEPARTMENT OF WATER RESOURCES</div>	
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical		
<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Mineral Exploration		
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):		
ORIGINAL WELL OWNER (IF KNOWN) Conoco		TOWNSHIP (N/S) 4.0 S	
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		RANGE (E/W) 9.0 E	
		SECTION 28	
		160 ACRE SW 1/4	
		40 ACRE NW 1/4	
		10 ACRE SE 1/4	
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001	
		COUNTY WHERE WELL IS LOCATED PINAL	
		LATITUDE 33 ° 3 ' 1.50 "N	
		LONGITUDE 111 ° 26 ' 11.50 "W	
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held	
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade	
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)	
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input checked="" type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper, Inc	FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper, Inc
MAILING ADDRESS 1575 W Hunt Hwy	MAILING ADDRESS 1575 W Hunt Hwy
CITY / STATE / ZIP CODE Florence, AZ 85132	CITY / STATE / ZIP CODE Florence, AZ 85132
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist	CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist
TELEPHONE NUMBER (520) 374-3984	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER (520) 374-3999	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
ROC LICENSE CATEGORY A-4	TELEPHONE NUMBER (602) 760-2423
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS mnicholls@haleyaldrich.com
EMAIL ADDRESS	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 456S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482749

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.5	0	40	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
0	825	5	0	825	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	825	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	825	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	40.3
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☐ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER


55-482749

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 4-6-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS IanReam@florencecopper.com	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482749** WELL OWNER ID: 456S

AUTHORIZED DRILLER: **NATIONAL EWP, INC.**

LICENSE NO: **823**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SE 1/4 of the NW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Murillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- Review instructions prior to completing form
- The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CBD

WELL REGISTRATION NUMBER

55 - 482749

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME	DWR LICENSE NUMBER
	NATIONAL EWP, INC.	823
	ADDRESS	TELEPHONE NUMBER
	1200 W. SAN PEDRO ST.	480-558-3500
	CITY / STATE / ZIP	FAX
	GILBERT, AZ 85233	

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	CONTACT PERSON NAME AND TITLE
FLORENCE COPPER INC	Ian Ream Sr. Hydrologist
MAILING ADDRESS	TELEPHONE NUMBER
1575 W HUNT HWY	520-374-3984
CITY / STATE / ZIP	FAX
FLORENCE, AZ 85132	520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE			LONGITUDE		
						3° 3'	3'	1.5" N	111°	26'	11.50" W
						Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL					
4S	9E	28	SW 1/4	N 1/4	SE 1/4	1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held					
BOOK						<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
MAP						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)					
PARCEL						<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 456S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	X		* 5-25 Ft. Perforated
5. Was the well casing video logged?		X	
6. Why was the well abandoned?	No longer needed.		

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482749**SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN** (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	40	6.5	0	40	5.6	X				X						
40	825	5	0	825	3	X				X						

Condition of casing: ☐ Good ☐ Fair ☒ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS			
0	824				X						

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER
230

Feet Below Land Surface

DATE ABANDONMENT COMPLETED
7.21.17

Casing Treatment							Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)					DEPTH FROM SURFACE		MATERIAL TYPE (T)										MIXING RATIO by (check one) <div><input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume</div>	VOLUME OF MATERIAL USED (cubic feet)
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND			
														GROUT	CHIPS	PELLETS				
0	5				X		5	824	X										15.2	61.3
5	824					Blast & Perforate														

Actual Abandonment Method (See Well Abandonment Handbook)**Emplacement Method of Sealing or Fill Material**

CHECK ONE

☐ Standard Method☐ Alternative 4☐ Variance Option☐ Alternative 1☐ Alternative 5☐ Alternative 2☐ Variance Option 1☐ Alternative 3☐ Variance Option 2☒ Other (please specify)

grout & blast

Type V Cement

CHECK ONE

☐ Gravity☐ Pressure Grouting☒ Tremie Pumped☐ Other (please specify)

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

SIGNATURE OF QUALIFYING PARTY

DATE

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well**
FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA Pinal	BASIN Pinal	SUBBASIN 11	D(4-9)28 CBD
RECEIVED DATE 4/7/2017	WATERSHED D8	WELL REGISTRATION NUMBER	
ISSUED DATE 4/13/2017	REMEDIAL ACTION SITE -	55- 482748	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type	Location of Well																		
CHECK ONE	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS																		
<input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify):	<table border="1"> <tr> <td>TOWNSHIP (N/S)</td> <td>RANGE (E/W)</td> <td>SECTION</td> <td>160 ACRE</td> <td>40 ACRE</td> <td>10 ACRE</td> </tr> <tr> <td>4.0 S</td> <td>9.0 E</td> <td>28</td> <td>SW 1/4</td> <td>NW 1/4</td> <td>SE 1/4</td> </tr> </table>	TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	4.0 S	9.0 E	28	SW 1/4	NW 1/4	SE 1/4						
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE														
4.0 S	9.0 E	28	SW 1/4	NW 1/4	SE 1/4														
ORIGINAL WELL OWNER (IF KNOWN) Conoco	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001																		
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy	COUNTY WHERE WELL IS LOCATED PINAL																		
DRILL DATE (IF KNOWN) October 1974	<table border="1"> <tr> <td colspan="3">LATITUDE</td> <td colspan="3">LONGITUDE</td> </tr> <tr> <td>33 °</td> <td>2 ' 59.34 "N</td> <td></td> <td>111 °</td> <td>26 ' 7.11 "W</td> <td></td> </tr> <tr> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> </tr> </table>	LATITUDE			LONGITUDE			33 °	2 ' 59.34 "N		111 °	26 ' 7.11 "W		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
LATITUDE			LONGITUDE																
33 °	2 ' 59.34 "N		111 °	26 ' 7.11 "W															
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds														
METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held																			
<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade																			
*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)																			
<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):																			

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls
TELEPHONE NUMBER (480) 558-3500	TELEPHONE NUMBER (602) 760-2423
ROC LICENSE CATEGORY A-4	EMAIL ADDRESS MNicholls@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 459S
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 482748

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	40	6.5	0	40	5.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	483	5				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE					DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT	CHIPS			PELLETS	SAND
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	483	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	65.2
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):

☐ Alternative 1 ☐ Variance Option *

☐ Alternative 2 ☒ Alternative 5:

☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance

☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 - 482748

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 4-6-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482748 WELL OWNER ID: 459S

AUTHORIZED DRILLER: NATIONAL EWP, INC.

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SE 1/4 of the NW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF


Sella Munillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.



KC

 Arizona Department of Water Resources Groundwater Permitting and Wells PO Box 36020 • Phoenix, Arizona 85067-6020 (602) 771-8527 • 1-800-352-8488	Well Abandonment Completion Report
--	---

- ❖ Review instructions prior to completing form
 - ❖ The drilling firm or single well licensee must file this report withing 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)
- ** PLEASE PRINT CLEARLY **

FILE NUMBER
D(4-9) 28 CBD
WELL REGISTRATION NUMBER
55 - 482748

SECTION 1. ABANDONMENT AUTHORIZATION			
Drilling Firm			
Mail To:	NAME NATIONAL EWP, INC.	DWR LICENSE NUMBER 823	<div style="color: blue; font-weight: bold;">RECEIVED</div> <div style="color: red; font-weight: bold; margin-top: 10px;">DEC 05 2017</div> <div style="color: blue; font-weight: bold; margin-top: 10px;">ADWR</div>
	ADDRESS 1200 W. SAN PEDRO ST.	TELEPHONE NUMBER 480-558-3500	
	CITY / STATE / ZIP GILBERT, AZ 85233	FAX	

SECTION 2. REGISTRY INFORMATION									
Well Owner Information									
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER INC						CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrologist			
MAILING ADDRESS 1575 W HUNT HWY						TELEPHONE NUMBER 520-374-3984			
CITY / STATE / ZIP FLORENCE, AZ 85132						FAX 520-374-3999			
Location of Well									
WELL LOCATION ADDRESS (IF ANY)						LATITUDE 33° 2' 59.34"N Degrees Minutes Seconds		LONGITUDE 111° 26' 7.11"W Degrees Minutes Seconds	
TOWNSHIP (N/S) 4S	RANGE (E/W) 9E	SECTION 28	160 ACRE SW 1/4	40 ACRE N W 1/4	10 ACRE SE 1/4	LAND SURFACE ELEVATION AT WELL 1475 Feet Above Sea Level			
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade			
						*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			

SECTION 3.			
Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if nessessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 459-S
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	X		* 5-25 ft perforated
5. Was the well casing video logged?		X	
6. Why was the well abandoned?			
No longer needed.			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER

55 - 482748

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	40	6.5	0	40	5.6	X				X						
40	483	5														

Condition of casing: ☐ Good ☐ Fair ☒ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	40			X								

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional Information

DEPTH TO WATER

230

Feet Below Land Surface

DATE ABANDONMENT COMPLETED

7.21.17

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE DESCRIBE OR IF CASING WAS PERFORATED DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS					
0	5				X		5	462	X										
5	462					Blast & Perforate													

Actual Abandonment Method (See Well Abandonment Handbook)

CHECK ONE ☐ Alternative 4 ☒ Other (please specify)

☐ Standard Method ☐ Variance Option

☐ Alternative 1 ☐ Alternative 5

☐ Alternative 2 ☐ Variance Option 1

☐ Alternative 3 ☐ Variance Option 2

grout & blast
Type V Cement

Emplacement Method of Sealing or Fill Material

CHECK ONE

☐ Gravity

☐ Pressure Grouting

☒ Tremie Pumped

☐ Other (please specify)

REMARKS

I state that this is filled in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

William Edoly

SIGNATURE OF QUALIFYING PARTY

DATE

11-6-17

**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov

**Notice of Intention to
Abandon a Well**
FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA D -	BASIN PIN	SUBBASIN 11	D(4-9)28 CDB
RECEIVED DATE 9-22-2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 9-25-2017	REMEDIAL ACTION SITE 000	55- 482798	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well							
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS							
<input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal		<input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify):							
ORIGINAL WELL OWNER (IF KNOWN) Conoco		TOWNSHIP (N/S) 4.0 S		RANGE (E/W) 9.0 E	SECTION 28	160 ACRE SW 1/4	40 ACRE SE 1/4	10 ACRE NW 1/4	
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		DRILL DATE (IF KNOWN) October 1974		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 200 31 0200		COUNTY WHERE WELL IS LOCATED PINAL			
		LATITUDE 33 ° 2 ' 56.79 "N Degrees Minutes Seconds		LONGITUDE 111 ° 26 ' 2.77 "W Degrees Minutes Seconds					
		METHOD OF LATITUDE/LONGITUDE (check one)		<input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade					
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey		<input type="checkbox"/> *GPS: Survey-Grade <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input checked="" type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Inc.	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1575 W. Hunt Hwy	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Florence, Arizona 85123	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (520) 374-3984	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER (520) 374-3999	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Lauren Candreva
TELEPHONE NUMBER (480) 558-3500	TELEPHONE NUMBER 602-760-2429
ROC LICENSE CATEGORY A-4	EMAIL ADDRESS lcandreva@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 460MF
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

VARIANCE GRANTED

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 -

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	50	7.875	0	50	6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50	474	5	0	474	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	474	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment					Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	SAND			
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	474	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	23.02
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4:
☐ Variance Option *
☒ Alternative 5:
☐ Variance Option 1*
☐ Variance Option 2*

* requires a letter requesting a variance

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

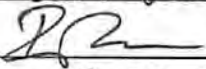

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a WellWELL REGISTRATION NUMBER
55 -**SECTION 7. Well Abandonment Diagram**

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE Ian Ream	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER 	SIGNATURE OF WELL OWNER 
DATE 9-21-2017	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ You must include with your Notice:
 - check or money order for any required fee(s)
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

Well ID: 460MF

FILE NUMBER

WELL REGISTRATION NUMBER

55 - 482798

** PLEASE PRINT CLEARLY **

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S) 4.0 S	RANGE (E/W) 9.0 E	SECTION 28	160 ACRE SW ¼	40 ACRE SE ¼	10 ACRE NW ¼
CITY / STATE / ZIP CODE Florence, AZ 85132		LATITUDE 33 ° Degrees	2 ' Minutes	56.79 "N Seconds	LONGITUDE 111 ° Degrees	26 ' Minutes	2.77 "W Seconds
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
TELEPHONE NUMBER 520-374-3984	FAX 520-374-3999	COUNTY ASSESSOR'S PARCEL ID NUMBER			COUNTY WHERE WELL IS LOCATED		
		BOOK 200	MAP 31	PARCEL 020	PINAL		

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm PRIOR TO the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

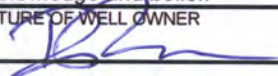
NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.
EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE Ian Ream, Sr. Hydrogeologist	SIGNATURE OF WELL OWNER  DATE 1-2-2018
--	--



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-8020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CDB

WELL REGISTRATION NUMBER

55 - 482798

Drilling Firm		
Mail To:	NAME LAYNE CHRISTENSEN COMPANY	DWR LICENSE NUMBER 7
	ADDRESS 12030 EAST RIGGS ROAD	TELEPHONE NUMBER 480-895-9336
	CITY / STATE / ZIP CHANDLER, AZ 85249-3701	FAX

Well Owner Information						
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC				CONTACT PERSON NAME AND TITLE Ian Ream Senior Geologist		
MAILING ADDRESS 1575 W. HUNT HWY.				TELEPHONE NUMBER 520-374-3984		
CITY / STATE / ZIP FLORENCE, AZ 85132				FAX 520-374-3999		
WELL LOCATION ADDRESS (IF ANY)				LATITUDE 33° 2' 56.79" N Degrees Minutes Seconds		LONGITUDE 111° 26' 2.77" W Degrees Minutes Seconds
TOWNSHIP (N/S) 4 S	RANGE (E/W) 9.0 E	SECTION 28	160 ACRE SW 1/4	40 ACRE SE 1/4	10 ACRE NW 1/4	LAND SURFACE ELEVATION AT WELL 1475 Feet Above Sea Level
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 200 MAP 31 PARCEL 020				METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade		
				*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):		

SECTION 2			
Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 460 MF
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	X		Blast and Perforate
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482798

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (Inches)	DEPTH FROM SURFACE		OUTER DIAMETER (Inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (Inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	50	7.875	0	50	6	X				X						
50	474	5	50	474		3				X						

Condition of casing: ☐ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	474	X										

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER

Feet Below Land Surface

DATE ABANDONMENT COMPLETED

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND	
0	5				X		0	474	X								14.3	64.60
5	25					Blast - Perf												

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify) Grout - Blast Type V Cement	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <i>Scott Graham</i>	SIGNATURE OF QUALIFYING PARTY <i>Scott Graham</i> DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482798** WELL OWNER ID: 460MF

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NW 1/4 of the SE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

ASSESSOR'S PARCEL NO: **200-31-020**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Murillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax

• www.azwater.gov •

Notice of Intention to Abandon a Well

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMAZONIA D-	BASIN PIN	SUBBASIN 11	D(4-9)28 CCA
RECEIVED DATE 9-22-2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 9-25-2017	REMEDIAL ACTION SITE 000	55- 402794	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer						
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical						
<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Mineral Exploration						
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):						
ORIGINAL WELL OWNER (IF KNOWN) Conoco							
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		DRILL DATE (IF KNOWN) November 1974					
		TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 4.0 S 9.0 E 28 SW 1/4 SW 1/4 NE 1/4					
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 200 31 0201			COUNTY WHERE WELL IS LOCATED PINAL		
		LATITUDE LONGITUDE 33 ° 2 ' 56.81 "N 111 ° 26 ' 6.23 "W Degrees Minutes Seconds Degrees Minutes Seconds					
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held					
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input checked="" type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Inc.	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1575 W. Hunt Hwy	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Florence, Arizona 85132	CITY / STATE / ZIP CODE Florence, Arizona 85132
CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER FAX NUMBER (520) 374-3984 (520) 374-3999	TELEPHONE NUMBER FAX NUMBER (520) 374-3984 (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME National EWP, INC		CONSULTING FIRM Haley & Aldrich, Inc.	
DWR LICENSE NUMBER 823	ROC LICENSE CATEGORY A-4	CONTACT PERSON NAME Lauren Candreva	
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS jstephens@nationalewp.com	TELEPHONE NUMBER 602-760-2429	EMAIL ADDRESS lcandreva@haleyaldrich.com

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 461MF
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 -

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	55	7.875	0	55	6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
55	385	5	0	385	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	385	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE				IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE							MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	SAND			
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	385	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	18.8
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method

☐ Alternative 1

☐ Alternative 2

☐ Alternative 3

☐ Alternative 4:

☐ Variance Option *

☒ Alternative 5:

☐ Variance Option 1*

☐ Variance Option 2*

* requires a letter requesting a variance

Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 -

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE Ian Ream	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER 	SIGNATURE OF WELL OWNER
DATE 9-21-2017	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS ianReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 461MF

FILE NUMBER

WELL REGISTRATION NUMBER
55 - 482794

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SW ¼	SW ¼	NE ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° 2 ' 56.81 "N Degrees Minutes Seconds			LONGITUDE 111 ° 26 ' 6.23 "W Degrees Minutes Seconds		
TELEPHONE NUMBER 520-374-3984		FAX 520-374-3999			METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):		
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 200 MAP 31 PARCEL 020			COUNTY WHERE WELL IS LOCATED PINAL		

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR** TO the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.
EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Ian Ream, Sr. Hydrogeologist

SIGNATURE OF WELL OWNER

DATE
1-2-2016



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report withing 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CCA

WELL REGISTRATION NUMBER

55 - 482794

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm		
Mail To:	NAME LAYNE CHRISTENSEN COMPANY	DWR LICENSE NUMBER 7
	ADDRESS 12030 EAST RIGGS ROAD	TELEPHONE NUMBER 480-895-9336
	CITY / STATE / ZIP CHANDLER, AZ 85249-3701	FAX

SECTION 2. REGISTRY INFORMATION

Well Owner Information						
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC				CONTACT PERSON NAME AND TITLE Ian Ream Sr. Geologist		
MAILING ADDRESS 1575 W. HUNT HWY.				TELEPHONE NUMBER 520-374-3984		
CITY / STATE / ZIP FLORENCE, AZ 85132				FAX 520-374-3999		
Location of Well						
WELL LOCATION ADDRESS (IF ANY)				LATITUDE 33° 2' 56.81" N Degrees Minutes Seconds		LONGITUDE 111° 26' 6.23" W Degrees Minutes Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL Feet Above Sea Level
4.0S	9.0E	28	SW 1/4	SW 1/4	NE 1/4	
COUNTY ASSESSOR'S PARCEL ID NUMBER				METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held		
BOOK 200	MAP 31	PARCEL 020		<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade		
				*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):		

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 461MF
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		
5. Was the well casing video logged?		X	
6. Why was the well abandoned? This well no longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482794

SECTION 4: BOREHOLE & WELL CONSTRUCTION DESIGN (attach additional page if needed)																
Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE			DEPTH FROM SURFACE			MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (Inches)	
FROM (feet)	TO (feet)	BOREHOLE DIAMETER (Inches)	FROM (feet)	TO (feet)	OUTER DIAMETER (Inches)	STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	55	7.875	0	55	6	X										
55	385	5	0	385	3	X										

Condition of casing: ☐ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
					GROUT	CHIPS	PELLETS					
0	385			X								

Refer to ADWR's Well Abandonment Handbook for additional information						DEPTH TO WATER Feet Below Land Surface		DATE ABANDONMENT COMPLETED	
								2-18-2018	

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS				
0	5				X		5	385	X								1:1	18.8
5	25				Blast / Perf													

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material			
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)			
Blast & Perforate Type V Cement							

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <i>Scott Graham</i>	SIGNATURE OF QUALIFYING PARTY <i>Scott Graham</i> DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482794** WELL OWNER ID: 461MF

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the SW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

ASSESSOR'S PARCEL NO: **200-31-020**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Selle Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

Notice of Intention to Abandon a Well

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA D -	BASIN PIN	SUBBASIN 11	D(4-9)28 CCA
RECEIVED DATE 9-22-2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 9-25-2017	REMEDIAL ACTION SITE 000	55- 482796	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer						
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical						
<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Mineral Exploration						
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):						
ORIGINAL WELL OWNER (IF KNOWN) Conoco							
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		DRILL DATE (IF KNOWN) October 1974					
		TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE					
		4.0 S 9.0 E 28 SW 1/4 SW 1/4 NE 1/4					
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL				COUNTY WHERE WELL IS LOCATED	
		200 31 020				PINAL	
		LATITUDE LONGITUDE					
		33 ° 2 ' 56.81 "N 111 ° 26 ' 8.64 "W					
		Degrees Minutes Seconds Degrees Minutes Seconds					
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held					
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input checked="" type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Inc.	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1575 W. Hunt Hwy	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Florence, Arizona 85132	CITY / STATE / ZIP CODE Florence, Arizona 85132
CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER FAX NUMBER (520) 374-3984 (520) 374-3999	TELEPHONE NUMBER FAX NUMBER (520) 374-3984 (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Lauren Candreva
ROC LICENSE CATEGORY A-4	TELEPHONE NUMBER 602-760-2429
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS lcandreva@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 462MF
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 -

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	65	7.875	0	65	6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
65	494	5	0	494	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	494	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE				IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE							MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	494	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	24
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option *
☐ Alternative 2 ☒ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1* * requires a letter requesting a variance
 ☐ Variance Option 2*

Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 -

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE Ian Ream	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER 	SIGNATURE OF WELL OWNER
DATE 9-21-2017	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 462MF

FILE NUMBER

WELL REGISTRATION NUMBER
55 - 482796

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Florence, AZ 85132		4.0 S	9.0 E	28	SW ¼	SW ¼	NE ¼
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		LATITUDE 33 ° Degrees	2 ' Minutes	56.81 "N Seconds	LONGITUDE 111 ° Degrees	26 ' Minutes	8.64 "W Seconds
TELEPHONE NUMBER 520-374-3984		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held			*GPS: Survey-Grade		
FAX 520-374-3999		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			COUNTY ASSESSOR'S PARCEL ID NUMBER		
		BOOK 200	MAP 31	PARCEL 020	COUNTY WHERE WELL IS LOCATED PINAL		

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR** TO the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.


EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE Ian Ream, Sr. Hydrogeologist	SIGNATURE OF WELL OWNER 	DATE 1-2-2018
--	---	------------------



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

**** PLEASE PRINT CLEARLY ****

FILE NUMBER

D(4-9) 28 CCA

WELL REGISTRATION NUMBER

55 - 482796

SECTION 1: ABANDONMENT AUTHORIZATION

Drilling Firm		
Mail To:	NAME LAYNE CHRISTENSEN COMPANY	DWR LICENSE NUMBER 7
	ADDRESS 12030 EAST RIGGS ROAD	TELEPHONE NUMBER 480-895-9338
	CITY / STATE / ZIP CHANDLER, AZ 85249-3701	FAX

SECTION 2: REGISTRY INFORMATION

Well Owner Information						
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC				CONTACT PERSON NAME AND TITLE Ian Ream Senior Hydrogeologist		
MAILING ADDRESS 1575 W. HUNT HWY.				TELEPHONE NUMBER 520-374-3984		
CITY / STATE / ZIP FLORENCE, AZ 85132				FAX 520-374-3999		
Location of Well						
WELL LOCATION ADDRESS (IF ANY)				LATITUDE 33 ° 2 ' 56.81 " N Degrees Minutes Seconds		LONGITUDE 111 ° 26 ' 8.64 " W Degrees Minutes Seconds
TOWNSHIP (N/S) 4.0 S	RANGE (E/W) 9.0 E	SECTION 28	160 ACRE SW 1/4	40 ACRE SW 1/4	10 ACRE NE 1/4	LAND SURFACE ELEVATION AT WELL 1470 Feet Above Sea Level
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 200 MAP 31 PARCEL 020				METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade		
				*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):		

SECTION 3

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE Well 426MF
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482796

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (Inches)	DEPTH FROM SURFACE		OUTER DIAMETER (Inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (Inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	65	7.875	0	65		6										
65	494	5	0	494		3										

Condition of casing: ☐ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	494			X								

Refer to ADWR's Well Abandonment Handbook for additional information						DEPTH TO WATER Feet Below Land Surface		DATE ABANDONMENT COMPLETED										
Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				DEPTH FROM SURFACE		MATERIAL TYPE (T)				MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)					
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT			CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS	SAND	
0	5				X		5	494	X								14.3	67.32
5	25					Blast Perf												

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				<input checked="" type="checkbox"/> Other (please specify) Blast & Perforate	
CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)					

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE Scott Graham	SIGNATURE OF QUALIFYING PARTY [Signature] DATE 3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
REISSUE-VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-482796 WELL OWNER ID: 462MF

AUTHORIZED DRILLER: LAYNE CHRISTENSEN COMPANY

LICENSE NO: 7

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the SW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

ASSESSOR'S PARCEL NO: 200-31-020

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Murillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF
ABANDONMENT.



**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

**Notice of Intention to
Abandon a Well**

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMANA D -	BASIN PIN	SUBBASIN 11	D(4-9)28CCA
RECEIVED DATE 9-28-2017	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 9-25-2017	REMEDIAL ACTION SITE 000	55- 482795	

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well																							
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS																							
<input type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer																								
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical																								
<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Mineral Exploration																								
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):																								
ORIGINAL WELL OWNER (IF KNOWN) Conoco																									
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Joy		DRILL DATE (IF KNOWN) November 1974																							
		<table border="1"> <tr> <th>TOWNSHIP (N/S)</th> <th>RANGE (E/W)</th> <th>SECTION</th> <th>160 ACRE</th> <th>40 ACRE</th> <th>10 ACRE</th> </tr> <tr> <td>4.0 S</td> <td>9.0 E</td> <td>28</td> <td>SW 1/4</td> <td>SW 1/4</td> <td>NE 1/4</td> </tr> </table>						TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	4.0 S	9.0 E	28	SW 1/4	SW 1/4	NE 1/4						
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE																				
4.0 S	9.0 E	28	SW 1/4	SW 1/4	NE 1/4																				
		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 200 31 0201			COUNTY WHERE WELL IS LOCATED PINAL																				
		<table border="1"> <tr> <th colspan="3">LATITUDE</th> <th colspan="3">LONGITUDE</th> </tr> <tr> <td>33 °</td> <td>2 '</td> <td>55.55 "N</td> <td>111 °</td> <td>26 '</td> <td>13.52 "W</td> </tr> <tr> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> </tr> </table>						LATITUDE			LONGITUDE			33 °	2 '	55.55 "N	111 °	26 '	13.52 "W	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
LATITUDE			LONGITUDE																						
33 °	2 '	55.55 "N	111 °	26 '	13.52 "W																				
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds																				
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held																							
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade																							
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)																							
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):																							

SECTION 2. OWNER INFORMATION

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input checked="" type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Inc.	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1575 W. Hunt Hwy	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Florence, Arizona 85132	CITY / STATE / ZIP CODE Florence, Arizona 85132
CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (520) 374-3984	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER (520) 374-3999	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm	Consultant (if applicable)
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Lauren Candreva
ROC LICENSE CATEGORY A-4	TELEPHONE NUMBER 602-760-2429
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS lcandreva@haleyaldrich.com
EMAIL ADDRESS jstephens@nationalewp.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) 463MF
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 -

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	50	7.875	0	50	6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50	720	5	0	720	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	720	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

10/01/2017

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE				IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	SAND			
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	720	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	35.10
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blast perforate			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE
☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☐ Alternative 3
☐ Alternative 4:
☐ Variance Option *
☒ Alternative 5:
☐ Variance Option 1*
☐ Variance Option 2*
 * requires a letter requesting a variance

Emplacement Method of Sealing or Fill Material

CHECK ONE
☒ Tremie Pumped (Recommended)
☐ Gravity
☐ Pressure Grouting
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 -

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE Ian Ream	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER 	SIGNATURE OF WELL OWNER
DATE 9-21-2017	DATE 9-21-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS ianReam@florencecopper.com



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- Review instructions prior to completing form in black or blue ink.
 - You **must** include with your Notice:
 - check or money order for any required fee(s)
 - Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

Well ID: 463MF

FILE NUMBER

WELL REGISTRATION NUMBER
55 - 482795

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Company		WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS					
MAILING ADDRESS 1575 W Hunt Hwy		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
		4.0 S	9.0 E	28	SW ¼	SW ¼	NE ¼
CITY / STATE / ZIP CODE Florence, AZ 85132		LATITUDE 33 °	2 '	55.55 "N	LONGITUDE 111 °	26 '	13.52 "W
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
TELEPHONE NUMBER 520-374-3984	FAX 520-374-3999	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 200 MAP 31 PARCEL 020			COUNTY WHERE WELL IS LOCATED PINAL		

Type of Request (CHECK ONE)

- ☒ Change of Well Drilling Contractor (Fill out Section 2) ☐ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm **PRIOR TO** the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL National Exploration, Wells, and Pumps		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Layne	
DWR LICENSE NUMBER 823		DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4
TELEPHONE NUMBER (480) 558-3500	FAX (480) 558-3525	TELEPHONE NUMBER (480) 895-9336	FAX (480) 895-9536

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Ian Ream, Sr. Hydrogeologist

SIGNATURE OF WELL OWNER

[Signature] 1-2-2018

DATE



Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ◆ Review instructions prior to completing form
- ◆ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CCA

WELL REGISTRATION NUMBER

55 - 482795

Drilling Firm	
Mail To:	NAME LAYNE CHRISTENSEN COMPANY
	ADDRESS 12030 EAST RIGGS ROAD
	CITY / STATE / ZIP CHANDLER, AZ 85249-3701
	DWR LICENSE NUMBER 7
	TELEPHONE NUMBER 480-895-9336
	FAX

Well Owner Information	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC	CONTACT PERSON NAME AND TITLE Ian Ream Senior Hydrogeologist
MAILING ADDRESS 1575 W. HUNT HWY.	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3989
Location of Well	
WELL LOCATION ADDRESS (IF ANY)	LATITUDE 33 ° 2 ' 55.55" N Degrees Minutes Seconds
	LONGITUDE 111 ° 26 ' 13.52" W Degrees Minutes Seconds
TOWNSHIP (N/S) 4.0 S	RANGE (E/W) 9.0 E
SECTION 28	160 ACRE SW 1/4
40 ACRE SW 1/4	10 ACRE NE 1/4
LAND SURFACE ELEVATION AT WELL 1470 Feet Above Sea Level	
METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held	
<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade	
COUNTY ASSESSOR'S PARCEL ID NUMBER	
BOOK 206	MAP 31
PARCEL 020	
*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 463MF
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		X	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		Blast & Perforate
5. Was the well casing video logged?		X	
6. Why was the well abandoned? No longer needed			

Well Abandonment Completion Report

WELL REGISTRATION NUMBER
55 - 482795

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (Inches)	DEPTH FROM SURFACE		OUTER DIAMETER (Inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (Inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	50	7.875	0	50	6	X									
50	720	5	0	720	3	X									

Condition of casing: ☐ Good ☒ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	720			X								

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (select additional pages if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER
N/A

Feet Below Land Surface

DATE ABANDONMENT COMPLETED
1-30-2018

Casing Treatment						Sealing or Fill Material											
DEPTH FROM SURFACE		TREATMENT TYPE (T)				DEPTH FROM SURFACE		MATERIAL TYPE (T)								MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS	SAND		
0	5				X		5	720	X								
5	25					Blast Perf											

Actual Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

CHECK ONE

☐ Standard Method☐ Alternative 1☐ Alternative 2☐ Alternative 3☐ Alternative 4☐ Variance Option☒ Alternative 5☐ Variance Option 1☐ Variance Option 2☐ Other (please specify)

Blast & Perforate

CHECK ONE

☐ Gravity☐ Pressure Grouting☒ Tremie Pumped☐ Other (please specify)

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

SIGNATURE OF QUALIFYING PARTY

DATE
3/12/18

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

**ABANDON
REISSUE-VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482795** WELL OWNER ID: 463MF

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON SPCL - MINERAL EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC 1575 W. HUNT HWY. FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the SW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

ASSESSOR'S PARCEL NO: **200-31-020**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Muriello

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

MAR 15 2017

ADWR

Notice of Intention to Abandon a Well

FEE
\$150.00

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR		FILE NUMBER
AMA/IN D -	BASIN PIN SUBBASIN II	D(4-9)28 CBD
RECEIVED DATE 3-15-2017	WATERSHED 08	WELL REGISTRATION NUMBER
ISSUED DATE 3-16-2017	REMEDIAL ACTION SITE 000	55-548200

SECTION 1. REGISTRY INFORMATION

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Other (please specify):		TOWNSHIP (N/S) 4.0 S RANGE (E/W) 9.0 E SECTION 28 160 ACRE SW 1/4 40 ACRE NW 1/4 10 ACRE SE 1/4					
ORIGINAL WELL OWNER (IF KNOWN) Magma		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001		COUNTY WHERE WELL IS LOCATED PINAL			
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Christensen Boyles Co		DRILL DATE (IF KNOWN) May 1995		LATITUDE 33 ° 2 ' 59.43 "N LONGITUDE 111 ° 26 ' 7.16 "W Degrees Minutes Seconds Degrees Minutes Seconds			
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Land Owner		Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.	
MAILING ADDRESS 1616 W. Adams Street		MAILING ADDRESS 1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE Phoenix, AZ 85007		CITY / STATE / ZIP CODE Florence, Arizona 85123	
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)		CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER (602) 542-4631	FAX NUMBER	TELEPHONE NUMBER (520) 374-3984	FAX NUMBER (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME National EWP, INC		CONSULTING FIRM Haley & Aldrich, Inc.	
DWR LICENSE NUMBER 823	ROC LICENSE CATEGORY A-4	CONTACT PERSON NAME Mark Nicholls	
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS jstephens@nationalewp.com	TELEPHONE NUMBER (602) 760-2423	EMAIL ADDRESS MNicholls@haleyaldrich.com

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) MCC544
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER
55 - 548200

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	380	5	0	380	4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
380	1320.5	3.88				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE								FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
					GROUT	CHIPS	PELLETS					
0	380	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's Well Abandonment Handbook for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE				IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	GROUT	CHIPS	PELLETS			SAND
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	1320.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	109.94
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Proposed Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material			
CHECK ONE				CHECK ONE			
<input type="checkbox"/> Standard Method	<input type="checkbox"/> Alternative 4:	<input type="checkbox"/> Other (please specify):		<input checked="" type="checkbox"/> Tremie Pumped (Recommended)			
<input type="checkbox"/> Alternative 1	<input type="checkbox"/> Variance Option *			<input type="checkbox"/> Gravity			
<input type="checkbox"/> Alternative 2	<input checked="" type="checkbox"/> Alternative 5:			<input type="checkbox"/> Pressure Grouting			
<input type="checkbox"/> Alternative 3	<input type="checkbox"/> Variance Option 1*	* requires a letter requesting a variance		<input type="checkbox"/> Other (please specify):			
	<input type="checkbox"/> Variance Option 2*						

APPLICATION CONTINUES ON PAGE 3

Notice of Intent to Abandon a Well

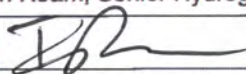
WELL REGISTRATION NUMBER
55 - 548200

SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 3-13-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

ARIZONA DEPARTMENT OF WATER RESOURCES
1110 W. Washington St. Suite 310
Phoenix, Arizona 85007

ABANDON
VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: 55-548200 WELL OWNER ID: MCC544

AUTHORIZED DRILLER: NATIONAL EWP, INC.

LICENSE NO: 823

NOTICE OF INTENTION TO ABANDON SPCL - EXPLORATION WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SE 1/4 of the NW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

Sella Murillo

GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020 • Phoenix, Arizona 85067-6020
(602) 771-8527 • 1-800-352-8488

Well Abandonment Completion Report

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report withing 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(4-9) 28 CBD

WELL REGISTRATION NUMBER

55 - 548200

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME NATIONAL EWP, INC.	DWR LICENSE NUMBER 823
	ADDRESS 1200 W. SAN PEDRO ST.	TELEPHONE NUMBER 480-558-3500
	CITY / STATE / ZIP GILBERT, AZ 85233	FAX

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC.	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrologist
MAILING ADDRESS 1575 W. HUNT HIGHWAY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999

Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE 33° 2' 59.43" N Degrees Minutes Seconds			LONGITUDE 111° 26' 7.16" W Degrees Minutes Seconds		
TOWNSHIP (N/S) 4S	RANGE (E/W) 9E	SECTION 2 8	160 ACRE SW _{1/4}	40 ACRE NW _{1/4}	10 ACRE SE _{1/4}	LAND SURFACE ELEVATION AT WELL 1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		×	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	×		IF YES, PLEASE STATE MCC544
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		×	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *
4. Was the well backfilled above the cement plug?	×		* Blast and Perf 5-25 ft.
5. Was the well casing video logged?		×	
6. Why was the well abandoned? No longer needed.			

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)															
Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	380	5	0	380	4	X				X					
380	1320	3.88													

Condition of casing: ☐ Good ☒ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	380			X								

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)		
Refer to ADWR's Well Abandonment Handbook for additional information	DEPTH TO WATER 230 Feet Below Land Surface	DATE ABANDONMENT COMPLETED 7.21.17

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND	
0	5				X		5	1274	Type V	X							15.2	128.4
5	357					Blast & Perforate												

Actual Abandonment Method (See Well Abandonment Handbook)				Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2				CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE William Eddy	SIGNATURE OF QUALIFYING PARTY [Signature] 11-6-17